

# PARENT LETTER REQUEST



Revised 6/08/17  
901 S. National Avenue • Meyer Library • Room 108 • Springfield, MO 65897  
Ph (417) 836-6199 • Fax (417) 836-7694

Oldham Family Veteran Student Center

Name: \_\_\_\_\_ SSN Last 4: \_\_\_\_\_ BearPass #: M \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Please Note: If you are using Financial Aid – You need to contact the MSU Financial Aid office.**

Name of secondary school \_\_\_\_\_

Semester(s) of enrollment at secondary school (*check one*):  Spring  Fall  Summer Year \_\_\_\_\_

Specific courses at secondary school (example MTH 100)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other specific information to be included:

If school is not OTC, please provide an email or fax number to whom the request should be sent:

Email: \_\_\_\_\_

Fax Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Attention: \_\_\_\_\_

No pick up available

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_