



**CERTIFICATION OF APPLICANT AS FULL TIME STUDENT**

**Name of Applicant:**

**Address of Applicant:**

I certify that the above named applicant is enrolled as a full time student at:

**Name of Educational Institution:**

**Address of Educational Institution:**

That (name of Institution)  
is a fully accredited post secondary educational institution,

That (name of Applicant)  
is enrolled for the Academic Year following the official summer holiday/ vacation/  
semester break which is from

to .

: i ``BUa Y. ....8Ute:

Dcg]hcb: .....

**Mailing Address:**

**Phone:** .....**Email:**

**\*\*Please gWb'UbX' attach Ub' official certificate of proof of student status  
(valid student card or other acceptable document) UbX'Ya U]'tc[ YH.Yf'k ]h' h.]g  
XcW a Ybh**