School name:	
School address:	
Contact information of the registered off	ice:
Tel:	
Fax:	
************	********
TO WHOM IT MAY CONCERN:	
I hereby authorize	
Taipei Economic and Cultural Offic	e, Canada
45 O'Connor Street, Suite 1960	
Ottawa, Ontario K1P 1A4	
Tel: (613) 231-5080 Ext. 239 Service	ces Division
Fax: (613)231-8491	
to confirm my student status with you.	
Please contact them as soon as possible	e.
Thank you for your assistance.	
Signatur	re:
Print Na	me:
Student	ID No.: