[PLEASE USE COM/SOM LETTERHEAD]

**LETTER OF GOOD STANDING TEMPLATE**

[DATE]

STUDENT NAME:

DEGREE:

CLASS LEVEL:

CLASS RANK/PERCENTILE (IF AVAILBLE):

GPA (IF AVAILABLE):

ENROLLMENT DATE:

ANTICIPATED GRADUATION DATE:

RE: [AOF SCHOLARSHIP NAME]

This document certifies that the individual identified above has been continuously enrolled as a full-time student in [INSERT SCHOOL NAME] as of the enrollment date. They are in good standing with the College/School. Should they receive a scholarship from the American Osteopathic Foundation, it will not render the student ineligible for other financial aid opportunities or reduce the total aid for which they are eligible within the school.

[OPTIONAL: Additional pertinent information that demonstrates the student’s merit is encouraged, but not required]

[SIGNATURE]

Name
Title
Email Address
Phone Number