Λ	berta:	
A	iberta:	

(INSERT AGENCY LETTERHEAD HERE)

Date:			
Re: TELUS Internet for G	ood Program		
To Whom It May Concern,			
l,	, from		am writing on
(your name)	(your agency)	
behalf of	who	was born on	.
(yout	h)	(yout	hs DOB)
		TELUS' Internet for Good	
they are, or would have b	een under a TAP (Trar	nsition to Adulthood progra	am) agreement.
Sincerely,			
(Signature and Printed N	ame)		
Your work phone number Your work cell number: Your work email address Your organization's mailing			

Please provide accurate contact information as TELUS may contact you to confirm the youth's application details.