

Saskatchewan:

(INSERT AGENCY LETTERHEAD HERE)

Date: _____

Re: TELUS Mobility for Good Program

To Whom It May Concern,

I, _____, from _____ am writing on
(your name) (your agency)

behalf of _____ who was born on _____.
(youth) (youths DOB)

I am able to confirm that this youth is eligible for TELUS' Mobility for Good Program as they were: (Choose one)

- In permanent or long term care of the Ministry of Social services up until their 18th birthday
- Are eligible for an Extension of Services Agreement

Sincerely,

(Signature and Printed Name)

Your work phone number:

Your work cell number:

Your work email address:

Your organization's mailing address:

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