

**Nova Scotia:**

**(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 temporary or permanent care and custody of the Department of Community Services up until their 19<sup>th</sup> birthday
- Are eligible for Post-Secondary Support for Youth and Custody 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.