

VERIFICATION LETTER FORM
For Hawai'i Language Access Conference Scholarship
March 28-29, 2008, Imin International Center, East-West Center

To the Executive Director of the Office of Language Access:

This is to verify that _____ (name of the scholarship applicant) has been affiliated with _____ (name of organization) since _____ (date affiliation began).

Please contact us should you require further information at (808) _____ (our organization's phone number).

Sincerely,

_____ (Name & Signature)

_____ (Indicate title/position)

Instructions for Verification Letter Form

Deadline for Submission: March 7, 2008, 4:30 p.m. HST

Who should use this form?

(1) You are applying for a scholarship to attend Hawai'i's Language Access Conference to be held on March 28-29, 2008 at the Imin International Center, East-West Center;

AND

(2) You are affiliated with a Hawaii non-profit or community organization.

Completing the form:

(1) Print a copy of the form;

(2) Clearly fill in the following information on the form:

(a) Name of the scholarship applicant – this is the name of the person who is applying for the scholarship to attend the conference;

(b) Name of organization – this is the name of the nonprofit or community organization that the applicant is affiliated with;

(c) Date affiliation began – this is the approximate date (month and year) when the affiliation began; and

(d) Organization's phone number

(3) Signature. An officer of the nonprofit or community organization must sign the form and indicate his or her title or position on the form.

Submit the Completed, Signed Form to OLA by March 7, 2008, 4:30 pm HST:

Mail: Office of Language Access
830 Punchbowl Street, Suite 322
Honolulu, Hawaii 96813

Telephone (808) 586-8730
Fax (808) 586-8733
Email: dliir.ola@hawaii.gov