

Current Standing in Course



From:

Title:

Phone:

Email:

To: CSN Paramedic Medicine Program Admissions  
6375 W. Charleston Blvd.  
Las Vegas, NV 89131  
(702) 651 – 5807  
[ems@csn.edu](mailto:ems@csn.edu)

Dir Sir or Madam,

I am submitting this letter on behalf of \_\_\_\_\_, who is applying to your  
Paramedic Medicine Program in \_\_\_\_\_. They are a current student in my course:  
\_\_\_\_\_, which will end by \_\_\_\_\_. Right now, this student has a  
grade in this course, which I \_\_\_\_\_ believe will be the same at the end of the course.

Sincerely,

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Printed Name

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Signature

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Date