

Authorization Letter to Enroll in University Courses

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[University Name]

[Department Name]

[University Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I, [Your Name], hereby authorize [Authorized Person's Name] to enroll me in the following courses for the [specific term/semester] at [University Name]:

- [Course Name 1] - [Course Code]
- [Course Name 2] - [Course Code]
- [Course Name 3] - [Course Code]

I confirm that I understand the terms and conditions of course enrollment and give my permission for [Authorized Person's Name] to complete the necessary registration steps on my behalf.

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]