



Request for Duplicate Act 48 Credit Letter

To request an official copy of any Act 48 credit letter, please complete this form, print and return it to the Schuylkill Intermediate Unit 29, Educational Services Department, PO Box 130, 17 Maple Ave., Mar Lin, PA 17951, with a check/money order for \$10.00 per course request.

Date of request: _____

Name: _____

Address: _____

Name at time of course(s) completion (if different than current name) _____

PPID Number: _____

Telephone Number: _____

Email Address: _____

Name of course(s) completed for which you are requesting letters	Date(s) of course(s)
_____	_____
_____	_____
_____	_____

Please allow 2-4 weeks for your letter(s) to be mailed.

Thank You.

IU 29 use only:

Account #6949-24

Check #: _____

Amount: _____

Letters Mailed On: _____