

[Date]
[Bank Name]
[Branch Address]
[City, State, Zip Code]

Subject: Institutional Request for Student Checking Account Activation

To the Branch Manager,

This letter is to formally request the activation of a Student Checking Account for the following individual, who is currently enrolled as a full-time student at [Name of Institution].

Student Information:

Full Name: [Student's Full Name]
Student ID Number: [ID Number]
Enrollment Status: [Current Year/Level]
Expected Graduation Date: [Month, Year]

We confirm that the student above is in good standing with the institution. We request that you provide them with the standard student banking benefits, including any waivers for monthly maintenance fees or minimum balance requirements as per your institutional banking policy.

The student will provide their government-issued identification and any additional personal documentation required by your bank to complete the process.

Should you require further verification regarding this student's enrollment status, please contact the [Registrar's Office/Department Name] at [Phone Number] or [Email Address].

Sincerely,

[Signature]
[Name of Official]
[Title/Position]
[Name of Institution]