

# Confirmation of Immigration Reclassification

Date:

To Whom It May Concern,

This document serves as official confirmation that the immigration status of the individual identified below has been reclassified as per the recent review and assessment.

|                                    |                      |
|------------------------------------|----------------------|
| Full Name                          | <input type="text"/> |
| Date of Birth                      | <input type="text"/> |
| Previous Immigration Status        | <input type="text"/> |
| New Immigration Status             | <input type="text"/> |
| Effective Date of Reclassification | <input type="text"/> |
| Reference Number                   | <input type="text"/> |

Should you have any questions regarding this confirmation or require further information, please contact our office.

Sincerely,

|                      |
|----------------------|
| <input type="text"/> |
| <input type="text"/> |
| <input type="text"/> |