

# University document request

Client email to the registrar

Edit this email and retain only the documents relevant to your application. Ask the university to verify and issue its own records and letters. These templates do not establish eligibility or replace an official document.

To: [Registrar or student records office email]

Subject: Academic records for degree recognition in Ecuador

Dear [Registrar or records team],

I am preparing an application to have my foreign qualification assessed for recognition in Ecuador. Please advise how I can obtain the official documents below for [full name as recorded], student number [number], awarded [exact qualification] on [award date].

## Documents requested

- Diploma or official replacement, and a transcript or other official academic record establishing the duration of study. Where available, include the subjects, credits and results.
- A field of knowledge letter identifying the field or branch of study corresponding to the qualification.
- If needed for my case, a letter confirming the actual delivery mode, including any online, distance, blended or in-person study.
- If duration needs clarification, a letter distinguishing the program's standard duration from my actual attendance, with credit and transfer information where relevant.
- Only if requested for my case: institutional or program accreditation evidence; documented ECTS equivalence; and evidence of my final project or equivalent work.

I have attached editable drafts as a guide to the information requested. Please adapt or replace them with your own verified wording and include an authorized signature, issue date and official verification email on institutional letterhead.

Please confirm the fees, processing time and delivery options for official electronic and paper copies. Please retain any digital signature or verification code in an electronic original. If authentication is needed, please explain which office can verify the issuer's signature. I will confirm any applicable apostille or legalization separately.

Thank you,

[Full name]

[Email and telephone]

[Student number or other university reference]

# Field of knowledge letter

Draft for the awarding university

University instructions: Adapt and verify every statement against institutional records. Replace all brackets, remove unused clauses and these instructions, and issue on official letterhead with an authorized signature, date and official email for verification. The applicant must not self-certify this letter.

[Official university letterhead]

Date: [day month year]    Reference: [institutional reference, if used]

To the authority reviewing this qualification in Ecuador

We confirm from the records of [legal name of awarding institution, country] that [graduate's full name], student number [number, if used], was awarded [exact qualification title] on [award date].

The field or branch of knowledge corresponding to this qualification is [field, branch or equivalent academic area used by the institution]. The program is administered by [faculty, school or department] and principally covers [brief factual description of the discipline and curriculum].

The basis for this classification is [approved program specification, curriculum, institutional classification or other identified record], version or date [reference].

[Optional: If the institution uses ISCED, state the applicable ISCED version, field title and code, and the institutional basis for assigning it. If the institution does not use ISCED, omit this paragraph or explain that fact. Do not invent or infer a code.]

Questions about the authenticity or content of this letter may be addressed to [responsible office] at [official institutional email] or [official telephone].

[Authorized signature]

[Name and title of authorized official]

[Office or department]

[Official institutional email and telephone]

Use the institution's established field terminology. This draft does not assign a SENESCYT category or guarantee a recognition outcome.

# Study modality letter

Draft for the awarding university

University instructions: Adapt and verify every statement against institutional records. Replace all brackets, remove unused clauses and these instructions, and issue on official letterhead with an authorized signature, date and official email for verification. The applicant must not self-certify this letter.

[Official university letterhead]

Date: [day month year]    Reference: [institutional reference, if used]

To the authority reviewing this qualification in Ecuador

We confirm from the records of [legal name of awarding institution, country] that [graduate's full name], student number [number, if used], completed [exact qualification title], awarded on [award date].

The graduate attended this program from [start date] to [completion date]. The actual teaching and learning modality was [in person, online, distance, blended or the institution's accurate equivalent].

The program was delivered through [describe relevant classes, supervised learning and assessment arrangements]. Required physical attendance, placements or clinical/laboratory practice took place at [location and dates or periods; omit where not applicable]. Any remote components consisted of [accurate description; omit where not applicable].

[If the modality changed: Identify each period, its delivery mode and the reason recorded by the institution. Include documented proportions or hours only when supported by institutional records.]

[For a doctorate: Identify the taught and research phases separately, with their actual dates, duration, countries and physical locations. Distinguish required classes from research periods and describe any remote research or supervision accurately. Cite the institutional records supporting these details.]

The enrollment load was [full time, part time or the institution's terminology] during [periods]. Enrollment load is recorded separately from the delivery modality described above.

This information is based on [enrollment records, approved program specification or other identified records]. Questions may be directed to [responsible office] at [official institutional email] or [official telephone].

[Authorized signature]

[Name and title of authorized official]

[Office or department]

[Official institutional email and telephone]

# Study duration letter

Draft for the awarding university

University instructions: Adapt and verify every statement against institutional records. Replace all brackets, remove unused clauses and these instructions, and issue on official letterhead with an authorized signature, date and official email for verification. The applicant must not self-certify this letter.

[Official university letterhead]

Date: [day month year]    Reference: [institutional reference, if used]

To the authority reviewing this qualification in Ecuador

We confirm from the records of [legal name of awarding institution, country] that [graduate's full name], student number [number, if used], was awarded [exact qualification title] on [award date].

## **Standard program duration**

The approved program normally comprises [number and type of terms or academic years], with each term lasting [duration]. Its total academic requirement is [number and name of credits, units or documented hours], under [definition of the institutional credit or unit system]. This standard duration applies to [entry assumptions and enrollment load].

## **The graduate's actual attendance**

The graduate began this program on [start date] and completed the academic requirements on [completion date]. Their enrollment load was [full time or part time, with periods if it changed]. [Describe any documented breaks, where relevant.]

[Where relevant: The institution accepted [amount and unit] of transfer credit or recognized prior learning from [identified basis]. The graduate completed [amount and unit] at this institution. Explain any documented acceleration or difference between standard duration and actual attendance.]

Supporting records: [transcript, approved curriculum or program guide, with version/date and relevant pages]. This letter reports the institution's records and does not assert compliance with a foreign recognition requirement.

[Authorized signature]

[Name and title of authorized official]

[Office or department]

[Official institutional email and telephone for verification]

# Accreditation verification letter

Optional draft for the institution or competent issuing body

University instructions: Adapt and verify every statement against institutional records. Replace all brackets, remove unused clauses and these instructions, and issue on official letterhead with an authorized signature, date and official email for verification. The applicant must not self-certify this letter. Use only when this evidence is requested or needed to clarify status.

[Official letterhead of the institution or competent issuing body]

Date: [day month year]    Reference: [institutional reference, if used]

To the authority reviewing this qualification in Ecuador

We provide the following verified information about [legal name of awarding institution, country] and the qualification [exact qualification title], awarded to [graduate's full name] on [award date].

The institution's legal authorization or official recognition is recorded by [competent national authority], under [register entry, decision or reference], effective [relevant dates]. Official verification is available at [authority's direct public record URL or verification contact].

[If applicable and verified: Institutional accreditation was granted by [accrediting body], under [decision/reference], covering [scope, campus and modality where specified] for [relevant validity period]. State the status applicable at the time of the graduate's award.]

[If applicable and verified: The specific program had [program accreditation, recognition or authorization status], issued by [competent body], under [decision/reference], for [scope and validity period]. If program accreditation does not apply, explain the relevant system and source; do not substitute institutional status for program status.]

The evidence supporting these statements is [identify official records or attached extracts and their dates]. [Explain any changes of institutional name, status or accreditation relevant to this qualification.]

This letter supplies factual evidence for assessment. It does not determine recognition in Ecuador or professional licensing eligibility.

[Authorized signature]

[Name and title of authorized official]

[Issuing office or competent body]

[Official email and telephone for verification]

# ECTS equivalence letter

Draft for applicable own qualification programs

University instructions: Adapt and verify every statement against institutional records. Replace all brackets, remove unused clauses and these instructions, and issue on official letterhead with an authorized signature, date and official email for verification. The applicant must not self-certify this letter. Request this only if an ECTS statement or documented equivalence is applicable to your case.

[Official university letterhead]

Date: [day month year]    Reference: [institutional reference, if used]

To the authority reviewing this qualification in Ecuador

We confirm from the records of [legal name of awarding institution, country] that [graduate's full name], student number [number, if used], completed [exact qualification title], awarded on [award date]. The qualification's official status within our system is [accurate description, including own qualification or título propio where applicable].

The program comprised [amount] [name of credits or units]. The institutional definition of these units and the documented total student workload are [definition, workload and relevant source].

[Select the verified statement that applies: The approved program directly awards [number] ECTS credits. OR The institution documents an equivalence of [number] ECTS credits under [named policy or approved methodology, version and date].]

The basis of the ECTS value or equivalence is [identify the approved program record and, for an equivalence, explain the institution's methodology and relevant workload evidence]. Attach [official credit record or approved equivalence statement].

[If no documented equivalence exists: State that the institution cannot certify an ECTS equivalence and provide its verified credit and workload information instead. Do not create a conversion by multiplying local credits or contact hours.]

This letter reports the institution's verified academic information. It does not assert that an Ecuadorian minimum or recognition condition has been met.

[Authorized signature]

[Name and title of authorized official]

[Office or department]

[Official institutional email and telephone for verification]

# Final project letter

Draft for applicable own qualification programs

University instructions: Adapt and verify every statement against institutional records. Replace all brackets, remove unused clauses and these instructions, and issue on official letterhead with an authorized signature, date and official email for verification. The applicant must not self-certify this letter. Use when a final project or equivalent academic work must be documented for your case.

[Official university letterhead]

Date: [day month year]    Reference: [institutional reference, if used]

To the authority reviewing this qualification in Ecuador

We confirm from the records of [legal name of awarding institution, country] that [graduate's full name], student number [number, if used], was awarded [exact qualification title] on [award date].

As part of this program, the graduate completed [type of final project, thesis, dissertation or other documented academic work], titled [exact title]. The work was [individual or group; identify the graduate's assessed contribution where relevant].

The work addressed [brief factual description of the subject, research question or applied task]. It was supervised by [name, title and department, if applicable] and assessed through [documented assessment or examination method].

The work was approved or passed on [date], with the recorded result [result or grade, if applicable]. It carried [documented credit or workload value, if applicable] within the program.

The record supporting this statement is [project approval, assessment record, transcript entry or other official evidence]. A public repository record is available at [direct URL, if applicable]. [If access is restricted, state the access or verification arrangement.]

[If the program used another form of culminating work, describe it accurately and the institutional basis for its role. If no such work was completed, do not issue a letter asserting otherwise; ask the reviewing team what evidence is needed.]

[Authorized signature]

[Name and title of authorized official]

[Office or department]

[Official institutional email and telephone for verification]

# Document package inventory

Client checklist to place inside the courier package

Complete this after payment using the checklist in your mailing instructions. Match each applicable item to that list, record the quantity and keep a copy. This inventory does not make every listed document mandatory.

Applicant: [full name]    Application reference: [reference]

Email: [email]    Telephone with country code: [telephone]

University and degree: [awarding institution and exact qualification]

| Document                                       | Qty | Version or notes         |
|------------------------------------------------|-----|--------------------------|
| Identity document copy                         | [ ] | Copy only                |
| Diploma or agreed official substitute          | [ ] | [Original / agreed copy] |
| Attached apostille or legalization             | [ ] | [Document it belongs to] |
| Transcript or academic record                  | [ ] | [Original / agreed copy] |
| Field of knowledge certificate                 | [ ] | [Original / agreed copy] |
| Modality or duration evidence if requested     | [ ] | [Identify documents]     |
| Translations or category evidence if requested | [ ] | [Identify documents]     |
| Final signed authorization letter              | [ ] | Signed original          |
| Other applicable supporting document           | [ ] | [Describe]               |

## Before sealing the package

- Use the final address in your paid instructions and confirm the recipient and telephone on the DHL label. DHL Express with tracking is recommended.
- Complete and sign the authorization letter provided with your payment confirmation. Include the signed original. A draft or this inventory is not an authorization letter.
- Keep your original passport. Keep scans of everything sent, keep attached apostilles with their documents, and use a rigid, protective, water-resistant document package.

Courier and tracking: [courier and tracking number]

Packed by: [name]    Date sent: [day month year]