

Your ref: ...



*ST. VINCENT AND THE GRENADINES*

Our ref:

*COMMUNITY COLLEGE*

Tel: (784) 457-4503  
Fax: (784) 457-5440  
Email: registrarsoffice@svgcc.vc

Villa  
St. Vincent  
West Indies

July 1, 2025

Please indicate your acceptance of this offer to the Division of Teacher Education by completing this form. It should be returned to the office at the Division of Teacher Education by August 05, 2025.

Yours sincerely

*Dr. Marise Butler*  
Dean

*Please indicate your interest by selecting the most suitable option.*

I accept the offer ☐

I do not accept the offer ☐

Comments:

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\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature