

Letter of Recommendation - Permission to Release Education Record Information

This release should be provided to and maintained by the letter writer, along with a copy of the letter of recommendation.

Requested By (Student):

Release letter of recommendation to:

LAST NAME FIRST NAME

NAME OF RECIPIENT ORGANIZATION

ACADEMIC PROGRAM

ADDRESS

DATE

CITY, STATE ZIP

Purpose of release:

I give permission to _____ to write a letter of recommendation on my behalf

and include the following information in the letter:

Grades -Yes ___ No ___/ **GPA**- Yes ___ No ___/ **Class Rank**-Yes ___ No ___

Other information—please specify _____ (Information not defined as “Directory Designated” information in the University FERPA policy, cannot be released without the written consent of the student.)

If an official or unofficial transcript is requested, an additional transcript request form must be completed and the appropriate charge will be assessed.

I ___waive ___do not waive my right to review a copy of this letter at any time in the future.

STUDENT SIGNATURE DATE

Action taken: Completed Other:

DATE: _____

BY WHOM: _____