LETTER OF RECOMMENDATION FOR GRADUATE ADMISSIONS

TYPE OR PRINT:
Applicant's Name:______________________________________________________________________________________

                                      Last                      First                      Middle
Program Name:_________________________________________________           Semester:________________________

NOTE: The Family Educational Rights and Privacy Act opens many student records for the student's inspection. The law also permits the student to waive his or her rights to inspect references. The applicant's signature below constitutes a waiver; no signature means the student retains the right to read this reference.

Applicant's Signature:___________________________________________    Date:__________________________

NOTE TO RECOMMENDER: Please return this recommendation, sealed in the attached envelope, to the applicant. Please type or word process, if possible. Attach additional sheets, if necessary.

Signature of Recommender:_______________________________________ Date: __________________________
Name (printed or typed): _________________________________________ Position:_______________________
Organization:____________________________________________________ Phone:_________________________
E-mail:__________________________________________________________