Letter of Recommendation

To the applicant: Complete the top section of the form before giving it to the faculty member or other person whom you have asked to write a letter on your behalf.

Applicant: __________________________________________________________

In accordance with the Family Educational Rights and Privacy Act of 1974, I hereby ___ waive ___ do not waive my rights of access to this recommendation.

Signature____________________________________ Date_____________

Recommender:

Please return the letter of recommendation directly to the Director of Graduate Studies.

Name and Title: _____________________________________________________

Signature: ___________________________ Date_____________