



## RELEASE FOR LETTER OF RECOMMENDATION

Return this completed form to the Office of the Registrar, 136 Bradley Hall.

**Instructions for Faculty and Staff:** This form may be used when a student requests you, as a school official, to write a letter of recommendation. A signed release is necessary to document written consent from the student. Student consent should include: (1) a description of the information to be disclosed, (2) to whom the information will be disclosed, and (3) the student's signature and date.

If a letter of recommendation contains **non-directory information**:

- **A written release is recommended** for letters sent to other educational institutions in which the student seeks to enroll, including professional school admission services.
- **A written release is REQUIRED** for general letters of recommendation sent to an employer or for any other purpose.

**Examples of non-directory information include: disciplinary status, GPA, grades, social security number, student ID, exam scores, or standardized test scores.** For a list of directory information that may be released without consent, please visit [www.msmary.edu/ferpa](http://www.msmary.edu/ferpa).

**Instructions for students:** Complete, sign, and return this form to the Office of the Registrar.

I \_\_\_\_\_ (Student's Name) give permission to the following staff or faculty member(s):

\_\_\_\_\_  
\_\_\_\_\_

to write a letter of recommendation and/or provide an oral reference to:

All persons or organizations listed here:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I give my permission to include the following non-directory information in this letter of recommendation or oral reference:

- Any information on my MSMU transcript including my grades and courses taken.
- Any educational and other records to which the recommender has (or has had) access in making academic and/or employee evaluations and decisions (including but not limited to examinations, essays, term papers, teaching evaluations, graduate committee evaluations, etc).
- Other (please specify)

\_\_\_\_\_  
\_\_\_\_\_

I hereby

Waive

Do not waive

My right to review this recommendation letter or to know the contents of any oral communication.

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_