

## **RECOMMENDATION REQUEST AND STUDENT AUTHORIZATION**

Student Name ( print)		
I authorize	(if applicable to specific applicable to all faculty in your arts school,	
•	me> faculty"; if applicat	ble to all faculty, enter "all faculty") to disclose
grades	GPA Other (specify)	Course Assignments/Projects/etc.
to the following entity/ies	S:	
for the purpose(s) of :		
scholarship application	•	
The recommendation mag	y be given in the followi	ng form(s) (check all that apply):
written letter of t		
Waiver of Access to Reco	ommendation informatio	n:
		ed to waive your right of access to this ss, the waiver remains valid indefinitely.
I waive	I do not waive	
access to this/these recon	nmendation(s).	

Signature