



PERMISSION TO WRITE A LETTER OF RECOMMENDATION

I give permission to _____ to write a letter of recommendation to:
Faculty member's name

Person, business or school's name _____

Address _____

The above mentioned faculty member has my permission to include my

(check all that apply)

- Grades
- GPA
- Class Rank

(choose one)

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

Signature of student

Date