



Authorization for Recommendations and References

The Family Educational Rights and Privacy Act (FERPA) prohibit an educational institution from releasing confidential, non-directory information about a student without the student's consent. You can waive this right for faculty and staff when you ask them to write letters of recommendation or serve as a professional reference.

Use this form to authorize an individual to use your education records as appropriate to provide requested information. It is your responsibility to identify any information you do not wish to have released. This authorization is effective until you withdraw it by resubmitting this form or notifying the individual in writing.

Action to be Taken

I hereby **authorize** the following individual to use information from my education records (transcript, grades, etc.) in letters of recommendation or professional references:

Print Full Name & Title

I hereby **cancel authorization** for the following individual to release information from my education records:

Print Full Name & Title

Right to Review

You have the right to review letters of recommendation written by the above individual. If you waive this right, the letters remain confidential.

I waive the right to review letters of recommendation.

I retain the right to review letters of recommendation.

Student Signature

Print Name

WIN (Student ID Number)

Date