

Request for Letter of Recommendation

Student Name: _____ E-mail Address: _____

Date Requested: _____ Phone Number: _____

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), I give permission for the following staff member(s) [please list below] to write a letter of recommendation in which he/she may reference my educational record.

I recognize the confidential nature of this document and I do / I do not waive my right to access:

Parent/Guardian Signature: _____ Date: _____

(if under 18)

Student Signature: _____ Date: _____

Directions: Students, you **MUST** complete this form and give to each teacher when you ask them to write you a letter of recommendation. Please allow the teachers **AT LEAST TWO WEEKS** to write your letter before you hand in your college application to Mrs. Hugh.

Students should include your brag sheet to your teacher to let them know more about you.