



**FERPA Release for Reference Request**

Name of Student: \_\_\_\_\_ Student G#: \_\_\_\_\_

I authorize \_\_\_\_\_ to serve as a reference for me for the purposes of  
*Name of person providing reference*

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

I authorize the above named person to release information about me and provide an honest evaluation from his or her knowledge of my qualifications. This evaluation could be based upon my involvement in activities or organizations outside the classroom or my performance in his or her class(es).

This information may be released to:

Name of institution/business \_\_\_\_\_

Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Attention \_\_\_\_\_

If this person has access to my education record, I authorize him/her to provide any academic information, including but not limited to my grades, GPA, class rank, scholarships, honors, awards, and comments from other instructors and lab assistants.

I waive my right to review a copy of the letter at any time in the future.

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

Student Signature: \_\_\_\_\_ Date : \_\_\_\_\_

***The author of the letter should retain this form for their files.***