

University of Utah Letter of Recommendation
Permission to Release Education Record Information

Name of Student _____ Student ID number _____

I give permission for _____ to write a letter of recommendation on my behalf for the purpose of a scholarship application. This letter can include the following information:

Please check all that apply:

Grades GPA Class Rank

Please provide a written recommendation to:

College of Science Scholarship Selection Committee
Dean's Office
220 JTB

I waive my right to review a copy of this letter of recommendation now and in the future.

Yes No

Signature of student _____ Date _____

Instructions for the student: Identify two research or academic faculty members who will complete a recommendation for you, and provide a signed Permission to Release form to each. Then, you will submit copies of the forms to the College of Science Dean's Office (220 JTB).

Instructions for the author: Mail your signed letter of recommendation to the above address and retain a copy of this waiver for your personal files.