Request for Recommendation Letter

Name: ___________________________________________________________________________

Panther ID Number _________________________________________________________________

Classes and Semester taken with the Faculty Recommender

Course_____________________________________________ Semester/Year _________________
Course _____________________________________________ Semester/Year _________________
Course_____________________________________________ Semester/Year _________________
Course _____________________________________________ Semester/Year _________________
Course_____________________________________________ Semester/Year _________________
Course _____________________________________________ Semester/Year _________________
Course_____________________________________________ Semester/Year _________________

When is the letter due? __________________________________________

PERMISSION TO RELEASE EDUCATIONAL RECORD INFORMATION

I, ___________________________________________________________________, give permission for ____________________________ __________  to release the items checked below in a (Instructor, university employee, department)

☐ Grades for courses  ☐ Scores on Exams

recommendation letter to ______________________________________________________________.

(Name of School, program, etc.)

________________________________________________ ____________________________
Student Signature      Date

Action Taken By: _____________________________________________________     Date: ___________