

Signature

## **Request for Letter of Recommendation**

Date

7/23

Letters of recommendation which are made from the recommender's personal observation or knowledge do not require a written release from the student who is the subject of the recommendation. If, however, the student wishes the recommender to include personally identifiable information from a student's education record (such as course name, grades, GPA, etc.) the student must provide a signed release. Recommendations can be provided without this signed release but the information provided by the recommender will be significantly limited without this permission.

Directions:			
1) Student: please complete the b	pelow form and either email, ma	ail or deliver it to the person who will be writing the	
letter on your behalf.			
2) Recommender: Please retain a	copy of the letter of recommer	dation and this form in your personal files.	
		, give my permission to Oakton College	•
to provide a recommendation on	my behalf to:		
Name			
Address			
Addicas			
City	State	Zip	
Email	<u>,                                    </u>		
Website (if applicable)			
Name of Oakton faculty/staff mer	nber you wish to complete the i	recommendation:	
Oakton College has my permission	n to include in the recommenda	tion:	
(Mark any that apply)	to include in the recommenda	tion.	
☐ Grades for and names of the fol	lowing courses:		
☐ Grade point average (GPA)		<del></del>	
□ Other			
		<del></del>	
Under the Family Educational Righ	nts and Privacy Act (FERPA), stud	dents have certain rights with regards to their	
educational records. Some of the	se rights include the right to rev	ew materials in educational records. You can choose	
whether or not you want to waive	these rights.		
Check one:			
		endation at any time in the future.	
$\square$ I do not waive my right to receiv	ve and/or review the letter of re	commendation at any time in the future.	