## **LETTER OF RECOMMENDATION**

| Office of Career Services * 124 Sa                                     | nd Spring Hall * Frostburg State University * Fro   | ostburg, MD 21532  |
|--|---|--|
| Candidate's Name   | Date of Graduation from FSU   | Major  |
|  | ad Privacy Act of 1974 provides for student access to option of waiving their right to access to reference. The reference.  |  |
| I wish to waive my right to  | o inspect and review the contents of this reference.  |  |
| I retain the right to inspec   | et the contents of this reference.  |  |
| Student's Signature  | Da  | te   |
| him/her, the individual's academic his/her potential are of most value | by in which you have known the student, the length of ability, personal qualities, and your general evaluate. Please do not make any reference to the candidate cap. When typed, please return to the above address | tion of the student and<br>e's race, color, sex, religion, |
| In the space below, please include                                     | your reference: (Please do not type on the back – U   | se second sheet if necessary                               |
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| Author's Printed Name and Signat                                       | ture:   |  |
| Position:  |   |  |
| Address:   |   |  |
| Phone:   | Date:   |  |