



Letter of Recommendation Request Form

Full Name (please print): _____

SSN or SID: _____

Class of: _____

Current Students

Dean's Letter of Recommendation from Dr. Parker (for one-year fellowships, scholarships, MBA, or MPH programs) – Official copy with signature. This form must be accompanied by your updated CV, personal statement, and deadline date.

I am applying for: _____

I am applying because: _____

If accepted, I hope to gain _____

If invited to interview as a result of my application, I accept my obligation to go. YES NO (circle one) initial here _____

List names and addresses for mailing documents below (for more than two locations, please attach second sheet):

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Deadline date is: _____ Deadline date is: _____

Note: allow 4 weeks for letter preparation. If deadline is in January, request form is due by October 15.

My signature assures my commitment to attend an interview if selected by the program(s) for which this letter is requested.

_____ Signature	_____ Date Requested
-----(for internal use only)-----	

approved _____ not approved _____

conditions/comments _____

Departmental Use Only	
<input type="checkbox"/>	Received on:
<input type="checkbox"/>	Processed on: