UF UNIVERSITY *of* FLORIDA

Release for Letter of Recommendation

Instructions for Faculty and Staff: This form may be used when a student requests you, as a school official, to write a letter of recommendation. A signed release is necessary to document written consent from the student. Student consent should include: (1) a description of the information to be disclosed, (2) to whom the information will be disclosed, and (3) the student's signature and date.

. If a letter of recommendation contains **non-directory information**;
- **A written release is recommended** for letters sent to other educational institutions in which the student seeks to enroll, including professional school admission services.
- **A written release is required** for general letters of recommendation sent to an employer or for any other purpose.

Examples of non-directory information include: disciplinary status, GPA, UFID or social security number, grades/exam scores and standardized test scores.

Instructions for Students: Complete, sign and return to the faculty or staff member.

I give my permission to _____ (Faculty or Staff Member Name) to write a letter of recommendation and/or to provide an oral reference to:

O All persons or entities listed here: _____.

I give my permission for _____ (Faculty or Staff Member Name) to include the following non-directory information in this letter of recommendation or oral reference:

O Any information on my UF transcript including my grades and courses taken.

O Any information on the attached curriculum vitae or résumé.

O Any information included in my attached personal statement.

O Any educational and other records to which the recommender has (or has had) access in making academic and/or employee evaluations and decisions, (including but not limited to examinations, essays, terms papers, teaching evaluations, graduate committee evaluations, and so forth.)

O Other (please specify)
_____
_____
_____

I hereby

O Waive

O Do Not Waive

my right to review this recommendation letter or to know the contents of any oral communication .

Student's Name *(please print)* _____   UFID: _____

(Optional) Student's Phone: _____   Student's Email: _____

Student's Signature: _____   Date: _____