

Signature of Recommender:

DIOCESE OF PATERSON

Catholic Schools Office

777 Valley Road Clifton, New Jersey 07013

973-777-8818 • Fax 973-779-0083 www.patersondiocese.org

WAIVER FORM FOR LETTERS OF RECOMMENDATION FOR TEACHER APPLICANTS

To the Applicant: Complete this part of the form and give it to the person from whom you have requested a letter of recommendation. Inform the person providing the reference to send the letter of recommendation to the address on the letterhead. No recommendation will be accepted unless this form appropriately signed is attached. Place a check $\lceil \sqrt{\rceil}$ in the appropriate space and sign and place the date in the appropriate place.

Letters of recommendation are NOT CONSIDERED confidential by this office unless you waive your right of access to them. Those writing letters of reference for you need to be aware of this fact. Many applicants feel that the recommendations may be enhanced by having it made clear that the applicant has waived his or her rights to access and thus that such letters are then considered confidential.

on:
ommendation:
Date:
f recommendation that you write for the Schools Office staff and all principals in o are interested in considering the applicant available to anyone else, even at the request may also have access to your letter of ess and indicated such above.
f

Date: