

Minnesota State University, Mankato
Department of Women's Studies

Reference/Waiver Form

To be completed by the student seeking admission to the M.S. program in Women's Studies and provided to the recommender.

Name of Applicant _____ Name of Recommender _____

Semester/Year of Proposed Enrollment _____

To be considered for admission, you must sign **one** of the statements below.

The Family Education and Privacy Act of 1974 gives the student the right to inspect letters of recommendation written in support of applications for admission or fellowship. The law also permits students to waive the right if they choose, although such a waiver cannot be a condition of admission or award.

The undersigned hereby waives any right to inspect the recommendation submitted by the person to whom this form is being given.

Signature _____

Date _____

The undersigned reserves the right to inspect the recommendation submitted by the person to whom this form is being given.

Signature _____

Date _____

To be completed by recommender.

Your letter of recommendation may be submitted electronically, e-mailed to cynthia.veldhuisen@mnsu.edu. However, this completed form must be sent through postal mail to Graduate Studies Coordinator, Department of Women's Studies, 109 Morris Hall, Minnesota State University Mankato, Mankato MN 56001.

Recommender's Name _____

Position _____

Address _____

Relationship to Student Applicant _____

Signature _____

Date _____