

....

The following student is requesting your recommendation and has indicated below his/her wish for right of access to this particular letter of reference in accordance with the Family Rights and Privacy Act of 1974.

Reference Form

1	<i>y C y</i>
Student's Name	Date of Graduation
I have elected to maintain a <u>cl</u> this reference.	osed file, and have thereby waived the right to inspect the contents of
I have elected to maintain an o	open file, and can inspect the contents of this reference at any time.
Signed (Student)	Date
you have known him/her, the individual's student, and his/her potential are the mo	ne capacity in which you have known the student, the length of time academic ability, personal qualities, your general evaluation of the st valuable to the prospective employer. Please do not make any on, or national origin. When typed, please return directly to the
PLEASE T	YPE, USE SECOND SHEET IF NECESSARY
Printed Name and Signature:	
Position:Organization/ Department:	Date
Address:	Date:

Career Center P.O. Box 495005

Mount Berry, GA 30149 – 5005