



## FERPA Release for Letter of Recommendation & Written/Verbal Reference

**Instructions:** Students, please read and fill out the appropriate sections of this form before delivering it to the faculty member who you are asking to write a letter of recommendation or serve as reference for you.

**Non-directory information** may not be included in a letter of recommendation without the student's written consent. Examples of non-directory information include: birth date, religion, citizenship, disciplinary status, ethnicity, gender, GPA, marital status, HUC-JIR ID number or Social Security number, grades/exam scores and standardized test scores (GRE, etc.)

---

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), I, the undersigned, hereby authorize \_\_\_\_\_ (*faculty/staff name*) to write a letter of recommendation or otherwise serve as written or verbal reference in which he/she may discuss any educational record, including performance in classrooms and activities of the College-Institute and in internships, of which the evaluator is aware.

The purpose of the information to be released (select all that apply):

- Employment
- Admission to an educational institution
- Other (please specify) \_\_\_\_\_

The information should be released to: (*name and address of receiving party provided by student*):

To: \_\_\_\_\_

**Additional persons/organizations may be listed on the back of this form.**

Address: \_\_\_\_\_

I understand further that (1) I have the right not to consent to the release of my education records for this letter; (2) I have a right to receive a copy of this letter upon request unless I waive that right; (3) and that this consent shall remain in effect until revoked by me, in writing, and delivered to the faculty/staff member, but that any such revocation shall not affect disclosures previously made by HUC-JIR prior to the receipt of any such written revocation.

- I waive my right to review a copy of this letter at any time in the future.
- I do not waive my right to review a copy of this letter at any time in the future.

\_\_\_\_\_  
Student name (please print)

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

Upon completion of this form, the student should submit it to the faculty/staff member.

**Faculty/staff members must retain this form attached to a copy of the letter of recommendation for a period of five years and forward the letter and this signed form (both sides if needed) to the Office of the National Registrar.** This information is released subject to the confidentiality provisions of FERPA and other appropriate state and Federal laws and regulations, which prohibit any further disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by such regulations.