



The Office of Field Education
**STUDENT RELEASE OF INFORMATION FOR
 RECOMMENDATIONS**

This *Student Release of Information for Recommendations* form authorizes the person listed below to share information from and about my student educational record in regard to all areas of my tenure at Duke University Divinity School, including, but not limited to, social security number, grade point average, specific grades in courses taken, and fitness for ministry evaluations/documents. I understand that I am permitting the faculty and/or staff person listed below access to my full educational record for the purposes of this reference request(s). I also understand that without this completed and signed form, the recommender may choose not to write a recommendation.

Instructions:

- 1. Student completes one form per recommendation request. (This request may include multiple recipients/addresses. For example, a request for a professor to send the same academic recommendation to multiple Ph.D. programs would require only one form.)**
- 2. Student returns completed form to Academic Affairs Office for approval and copy for student file.**
- 3. Student delivers duplicate copy from Academic Affairs to recommender.**
- 4. Please allow two weeks lead time when considering recommendation deadlines.**

 (Printed full name of Recommender)

 (Printed full name of student authorizing release)

 (Student's Degree Program / Graduation Date)

 (Student E-mail Address)

 (Student Phone Number)

Please Send Recommendation Letter to the following recipient(s):

____ I waive my right to view this recommendation.

____ I do not waive my right to view this recommendation.

 (Signature of student authorizing release)

 (Date)

 (Academic Affairs Staff)

 (Date)