FERPA AUTHORIZATION TO RELEASE INFORMATION ON REQUEST FOR
LETTERS OF RECOMMENDATION OR OTHER INFORMATIONAL NEEDS

TO: __________________________________________________________________________
(Name of University Official and Department)

Please ___ write a letter or recommendation
___ complete evaluation form
___ release information verbally
___ other (specify) __________________________________________________________

TO: ___ all potential employers
___ any educational institution
___ only to the following ____________________________________________ (specify)

For the following purpose: ___ employment
___ admission to an educational institution
___ other (specify) _______________________________________________________

I authorize you to consult my educational record at North Carolina State University
to reveal such information from my educational record, as you consider appropriate for the
purpose stated above.

I waive ( ), do not waive ( ) -check one- my right to see the recommendation
or other information prepared pursuant to this release.

Name (print) ________________________________

Signature _________________________________

Student ID Number _________________________

Date _________________________________