

Guidelines for Requesting Letters of Recommendation

The student or graduate from the El Centro Nursing Program must request that a letter of recommendation be mailed. A letter request waiver must be completed for *every* contact. Guidelines listed on the form must be followed for each request.

Letter Request Waiver

I hereby authorize the faculty member given as a reference to answer any and all questions that may be asked concerning me. I also authorize the inclusion of grades and clinical performance information in my request for a letter of recommendation.

Student Name (Print and Sign) _____

Date _____ Social Security # _____

Program _____ Current Course # _____

Current Student? _____ Anticipated Graduation Date _____

Your Phone Number _____

Readmission _____ Scholarship _____ Employment _____

Address letter to _____

Title _____

Facility _____

Address _____

Name of Instructor(s): _____

and/or Dean: _____

(EMPLOYMENT LETTERS WILL BE MAILED. YOU MAY PICK UP A PHOTOCOPY. SCHOLARSHIP LETTERS MUST BE PICKED UP BY THE STUDENT)

Comments _____

Student Current Address: _____

Guidelines:

1. Be sure to request permission from faculty prior to turning in a request form.
2. A form must be completed for each request.
3. Sufficient time must be allowed for administration and/or the faculty member to complete your request. Instructor not available winter and summer breaks, with exception i.e. BNE.
4. Faculty may refuse to write letters of recommendation.

