

**Baker University**

**Permission to Disclose Protected Information in a  
Letter of Recommendation or as a Personal or Professional Reference**

*I hereby give permission to:*

\_\_\_\_\_ (Name of faculty or staff person providing recommendation)

*to write a letter of recommendation and/or provide information as a personal or professional reference on my behalf to the following individual(s)/institution(s):*

Name of Individual/Institution: \_\_\_\_\_

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

\_\_\_\_\_

Name of Individual/Institution: \_\_\_\_\_

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

\_\_\_\_\_

Name of Individual/Institution: \_\_\_\_\_

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

\_\_\_\_\_

Name of Individual/Institution: \_\_\_\_\_

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

\_\_\_\_\_

Name of Individual/Institution: \_\_\_\_\_

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

\_\_\_\_\_

*In his/her role as a reference on my behalf, the faculty or staff person identified above has permission to include my grades, class performance, GPA, class rank, and other protected academic or personal conduct information in their communication with the individual(s)/institution(s) identified in this document.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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*In addition, I (circle one) **WAIVE** / **DO NOT WAIVE** my right to review at any time in the future a copy of any written communication authored by the faculty or staff person identified above in their role as a reference on my behalf:*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_