REQUEST FOR LETTER OF RECOMMENDATION

Student name: ___________________________ Date: ___________________________

Print Full Name

Current semester/course: ___________________________ Contact number: ________________

ADN graduation date: ___________________________ Email address: ______________________

Letter is needed for (check one or more of the following boxes):

- Scholarship/Grant
  Name of scholarship or grant: ___________________________

- Letter of reference or recommendation for a job or position:
  Specify position: ___________________________
  Specify facility/organization: ___________________________

- General/multi-purpose letter:
  Reason(s) for letter: ___________________________

- Letter of reference/recommendation for resumé.

- Letter of reference/support required by BRN

- Other: ___________________________

Letterhead or address of letter recipient:

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Supply the following:

- Number of letters needed: ___________________________

- Date letter is needed: ___________________________ (Give at least 3 weeks notice)

- Letter or form to be in sealed envelope with/without (circle one) author’s signature written across envelope flap

- Letter may be viewable by student

- Include any information, resumé, extracurricular activities, employment history, and academic or service achievements that may assist in letter composition:
  ___________________________

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- Note of appreciation to author of letter after its completion

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Faculty use only:

- Student may get letter from/how: ___________________________ by ________________

Rev.6/12: ADN/Policies&Procedures: cs