

SCHOOL OF GRADUATE STUDIES AND RESEARCH
EDINBORO UNIVERSITY OF PENNSYLVANIA

Reference for Admission

(Name of Student) _____ has applied for admission to the Graduate School at Edinboro University of Pennsylvania and has given your name as a reference.

Please provide below (or on an attachment) your assessment of the personal qualifications, aptitude, and motivation of this individual in terms of satisfactorily completing a graduate program.

Return your recommendation to the School of Graduate Studies and Research, 148 Meadville Street, Edinboro University of Pennsylvania, Edinboro, PA 16444.

Thank you for your cooperation.

Note: Under the provisions of the Family Education Rights & Privacy Act, the applicant has the right to retain or waive access to this reference. Access will be provided to the candidate unless the waiver below is signed.

I hereby waive my right of access to the reference appearing on this page.

Signature of Candidate

Please type or print name and title

Institution/Organization

Signature

Date