

THE UNIVERSITY OF
ARIZONA
TUCSON ARIZONA

Graduate Admissions Committee
Department of Planetary Sciences
The University of Arizona
PO Box 210092
Tucson, AZ 85721-0092

RECOMMENDATION FOR ADMISSION

Applicant's Name and Address

Respondent's Name, Dept., & Institution

The family Educational Rights and Privacy Act of 1974 and its amendments guarantee a student the right of access to his or her educational records, including letters of reference, unless such right of access has been explicitly waived in advance.

The following signed statement indicates the wish of the applicant regarding this recommendation.

I do waive
my right to inspect the contents of the following or attached
recommendation.

I do NOT waive

Student's signature

Date

To the applicant: Please fill in and sign the above statement after you receive consent of the respondent to provide a recommendation. Give this form and the return envelope to the respondent

To the respondent: Please include in your assessment: The circumstances under which you have known the applicant; your opinion of his or her academic performance; an assessment of the applicant's promise as a graduate student and a research scientist; and any other information that you think pertinent or useful.