

# UNIVERSITY of ALASKA ANCHORAGE

Enrollment Services • 3211 Providence Drive • Anchorage, AK 99508 • (907) 786-1480

## Reference Letter Request: FERPA Release and Release of Liability

**Please submit this form to the person(s) providing the reference and attach any information you feel is relevant. This form does not need to be submitted to Enrollment Services.**

\_\_\_\_\_  
Student's name

\_\_\_\_\_  
UA ID Number

I request \_\_\_\_\_ to serve as a reference for me.

The purpose(s) of the reference are: (check all that apply)

Application for Employment

Scholarship or honorary award

Admission to another educational institution

This reference may be given in the following forms: (check all that apply)

Written

Oral

I authorize the above-named person(s) to provide an evaluation of any aspect of my academic performance, whether based on personal observation or on my education records at UAA, and to release information from my education records, including: (check all that apply)

GPA

Grades

Personally Identifiable Information

Academic Performance

Work Performance

I authorize release of this information and references or evaluation to: (check all applicable boxes)

All prospective employers, **or**

Specific Employer: \_\_\_\_\_

All organizations considering me for a scholarship or award, **or**

Specific organization considering me for a scholarship or award: \_\_\_\_\_

All educational institutions, **or**

Specific educational institution: \_\_\_\_\_

I understand that under the Family Educational Rights and Privacy Act, 20 U.S.C. Sec. 1232g: (1) I have the right to not consent to the release of my education records; (2) I have the right to receive a copy of any written reference upon request; and (3) I may, but am not required to, waive my right of access to confidential references given for any of the purposes listed above.

I waive my right of access to references given by the above named person(s).

I do not waive my rights of access to references given by the above named person(s).

**This consent shall remain in effect until revoked by me, in writing, and delivered to the office that this disclosure was originally given, but that any such revocation shall not affect disclosures made prior to the person's receipt of my written revocation.**

I release UAA, its employees, and the person(s) providing the above described reference or evaluation from all claims and liability for damages that may result from their compliance with this request.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date