



Office of Records and Registration
 Eastern Michigan University
 304 Pierce Hall • Ypsilanti, MI 48197
 Phone: (734) 487-4111 • Fax: (734) 487-6808
 registrar@emich.edu

Permission to Release Educational Record Information through Letter of Recommendation

The required information is necessary for the continuous legitimate business and educational operation of Eastern Michigan University. It is, and will be, maintained in compliance with applicable US law, educational accrediting body requirements, and institutional policies and procedures. Questions or concerns may be directed to the Office of Records and Registration at registrar@emich.edu.

Name of Student _____ Student ID number _____

I give permission for the following person or people:

Name	Position
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Name	Position
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to write a letter(s) of recommendation on my behalf. This letter may include, but may not be limited to, the following information (check all that apply):

- Course Grades
- Course registration
- Institutional GPA
- Class Rank
- Attendance
- Participation
- Work Ethic
- Attitude

- By checking this box, I waive my right to review a copy of this letter of recommendation now and in the future.

Student Signature

Date

**Please submit request via mail, email or fax:
 Office of Records and Registration
 303 Pierce Hall
 Ypsilanti, Michigan 48197
 Email: registrar@emich.edu
 Fax: 734.487.6808**