MAROUETTE UNIVERSITY

STUDENT REFERENCE REQUEST FORM

Student name (please print): Marquette Student ID Number:
I, the above-named student, hereby request that
or
□ application/reference for employment
□ all forms of scholarship or honorary award
□ admission to an educational institution/program
The reference may be given in the following form(s): (check one or both spaces)
□ written □ oral
I authorize Employee(s) to release any and all information from my education records, as defined in the Family Educational Rights and Privacy Act (FERPA) and to provide an evaluation relating to my education at Marquette University (including but not limited to grades, coursework, internship evaluation and comments by agency supervisors) to the following: (check one)
□ - all prospective employers, educational institutions to which I seek admission and all organizations considering me for an award or scholarship OR
$\hfill\Box$ - only those specific employers, educational institutions and/or organizations listed on the reverse side of this form
I further authorize the release of information relating to student teacher evaluations, if applicable:
\square Yes \square No \square Not applicable
I understand and agree that this authorization shall remain in effect until revoked by me, in writing, and delivered to Employee(s), but that any such revocation shall not affect disclosures previously made by Employee(s) prior to receipt of such written revocation. Further, I hereby agree to indemnify, defend and hold harmless Employee(s), and Marquette University, for any claim arising out of, or related to, any reference or information provided pursuant to this authorization.
Signature of Student: Date:
List all employers, educational institutions and/or organization to which I authorize the release of information by Employee (attach additional sheets if necessary):
(Attach additional sheets if necessary)