

MARQUETTE UNIVERSITY

STUDENT REFERENCE REQUEST FORM

Student name (please print): _____

Marquette Student ID Number: _____

I, the above-named student, hereby request that
or (hereinafter "Employee(s)") serve as a
reference for me. This reference is for the following purpose(s): (check all that are applicable)

- 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 evaluations 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
- 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:

- Yes No 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: _____

