Request for Letter of Recommendation
The South Hills School of Business & Technology

This form may be used by a student to authorize release of non-directory information from his/her education record for purposes of a letter of recommendation, application to an educational institution, or other purposes identified. This form should be completed and presented to the individual making the recommendation.

I hereby authorize __________________________________________________________________
(Name of Faculty Member or other South Hills Official)

to serve as a reference for me. The purpose(s) of this reference are (check all that apply):

- application for employment
- scholarship or honorary award
- admission to another educational institution
- internship
- other (specify) ______________________________

The reference may be given in ____ written and/or ____ oral form (check one or both options).

I authorize the above-named person to release information and provide an evaluation about any and all information from my education records at South Hills to the following (check all that apply):

1) ____ all prospective employers, or
   ____ specific employers (list) ________________________________
2) ____ all educational institutions, or
   ____ specific educational institutions (list) _______________________
3) ____ all organizations considering me for an award or scholarship, or
   ____ specific organizations (list) ________________________________

I understand that this consent to release information will remain valid until revoked by me, in writing and delivered to an official of South Hills School.

Student Name: _____________________________________________________________

Student Signature: ____________________________________ Date: __________