

HARVARD COLLEGE
Request for Recommendation

Office of the Allston Burr Resident Dean, Pforzheimer House

56 Linnaean St

Cambridge, MA 02138

phone: 617-495-8176 fax: 617-496-3788

Academic Coordinator's email: pforz@fas.harvard.edu

STUDENT: Please complete the top section of this form and give it to your recommender along with a stamped envelope addressed to the Office of the ABRD (address above). Ask that your recommender complete the bottom section of this form and that the letter be on signed letterhead.

Name of Student (print): _____ Class: _____

Student's Email Address: _____

Name of Recommender (print): _____

Purpose of Recommendation: _____

Date Recommendation is Due in House Office: _____

Release of Recommendation

I hereby request that Harvard College send this letter of recommendation to the people or institutions that I designate. I will provide the Office of the ABRD with a written list of all such people or institutions.

Student's signature

Date

Waiver of Access to Recommendation

I understand that, under the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g ("FERPA"), I have the right to see this letter of recommendation.

I hereby WAIVE/ DO NOT WAIVE my right of access under FERPA with respect to this letter of recommendation.

Student's signature

Date

RECOMMENDER: Most programs require letters to be both **signed** and **on letterhead**. Please mail OR fax OR email this signed form, along with your letter of recommendation, to the Office of the ABRD (contact info in the box above). Please take note of the student's choice regarding right of access to your letter of recommendation. If the student has waived the right to see your letter, please mark the top of your letter "Confidential."

Permission to Use Excerpts from Recommendation

I AUTHORIZE / DO NOT AUTHORIZE Harvard College to use excerpted portions of my letter of recommendation in composing Dean's Letters on behalf of this student.

Recommender's signature

Date

LETTERS OF RECOMMENDATION

All letters of recommendation that you wish to place on file as part of your permanent record **must** be accompanied by a properly completed recommendation waiver form, available online at <http://pfoho.harvard.edu/Dossier> as well as outside the Academic Coordinator's Office.

If you wish to have copies of letters from your file sent elsewhere visit <https://goo.gl/forms/R1pFhGCFEjk2svpp2>

OR

Email to pforz@fas.harvard.edu

Be sure to include the name(s) of the recommenders whose letters you want sent, and the name and addresses of the location(s) to which the letters should be sent. If you would like the letters mailed please note that you must provide pre-addressed, pre-stamped envelopes. Letters can also be emailed or uploaded. Allow one full week for any letter to be sent.

Please Note: Harvard Policy dictates that any letters to which you have waived access must be sent directly to the recipient (admissions committee, fellowship committee, potential employer, etc.), separate from any materials you may have to send. Exceptions cannot be made to this rule, so please plan accordingly. In the event that application instructions REQUIRE you to submit all materials together, you may submit an envelope containing all other materials to the Office of the ABRD. Your letters will be added and the entire packet will be mailed.