



For the Applicant: Please TYPE the following information before giving this form to your letter writer.

Name: Last First Middle UMID Number

Please check one of the following:

- I intend to use this reference letter for: Medical School, Law School, Other Graduate or Professional School, Employment, General Purposes

Confidentiality Preference: Please provide your signature and check one of the following boxes. All letters received by The Career Center's Reference Letter Service without a signature will automatically be designated as non-confidential.

Per the Family Educational Rights and Privacy Act of 1974, I request a:

- CONFIDENTIAL evaluation. I hereby permanently waive my rights of access to this evaluation.
NON-CONFIDENTIAL evaluation, and thereby retain my right to review the content of this evaluation.

Applicant Signature Date

For the Writer:

- Please complete the grid below and attach this form to a typed, narrative reference letter on your organizational letterhead.
In accordance with anti-discrimination laws and regulations, please refrain from including potentially discriminatory information...
For guidelines on writing reference letters please refer to http://www.careercenter.umich.edu/students/refletter/writingguide/

Grid for evaluation with columns: Outstanding, Very Good, Good, Below Average, No Basis for Judgment and rows for various skills like Intellectual and Scholarly Abilities, Oral Communication, etc.

Author's Name Title/Position
Organization Address
City State ZIP code
Phone E-mail
Original Signature Date

[ Evaluations require the author's original signature. Faxed letters or photocopies cannot be accepted. ]

PLEASE DO NOT RETURN CONFIDENTIAL LETTERS TO APPLICANTS

Please return letters directly to the following address: Attn: Reference Letter Service • The Career Center • University of Michigan • 3200 SAB • 515 E. Jefferson Street • Ann Arbor, MI 48109-1316
For questions, please call (734)764-7459 or e-mail rlservice@umich.edu