

Resurrection Lutheran Church Reference/Recommendation Information and Waiver Form

To:				
Name of Reference				
Name of Applicant:				
Last	First	MI		
The above named individual is submitting an application for a scholarship from Resurrection Lutheran Church. He/She is requesting that you provide a letter of reference/recommendation. These scholarships will be awarded to students who have outstanding academic records, possess positive personal and leadership qualities, participate in extra curricular activities, including but not limited to music, drama, student government, athletics, etc., participation in church and church youth activities and community service. It is requested that you address these items in your letter of reference/recommendation. In addition, you may wish to comment on the applicant's character, integrity, cooperation, dependability, poise, and attitude toward criticism.				
	RIGHT TO INSPECT LET ENCE/RECOMMENDAT			
Federal law gives individuals the right to inspect their records including letters and statements of recommendation. The law also stipulates that individuals may waive their right to inspect confidential recommendations that are used solely for their intended purpose.				
Check One:				
I hereby waive my rights to p statements of recommendat				
I <u>do not waive</u> my right to per of recommendation contains				
Signature of Applicant		Date		
References please note: This o	completed form and your	letter must be mailed to:		

Resurrection Lutheran Church – Scholarship Committee 9300 Jason Avenue NE Monticello, MN 55362



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