



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.

WAIVER OF RIGHT TO INSPECT LETTERS OF
REFERENCE/RECOMMENDATION

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 personal access to confidential letters and statements of recommendation contained in my scholarship application files.

_____ I do not waive my right to personal access to confidential letters and statements of recommendation contained in my scholarship application files.

Signature of Applicant

Date

References please note: This 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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