



**RHODE ISLAND
COLLEGE**

**Faculty of Arts and Sciences
GRADUATE PROGRAMS**

LETTER OF RECOMMENDATION REQUEST FORM

To be filled in by applicant:

Mr., Ms. _____ has applied for admission to graduate study in _____ at Rhode Island College. Please indicate in the space provided below your estimation of the candidate's potential to do graduate work.

Signature _____ Date _____

Name _____
(Please print) (Institution or firm) (Position)

Address _____

Statement of Confidentiality

The applicant is hereby advised that, in compliance with the Family Educational Rights and Privacy Act of 1974, the strict confidentiality of all information and materials received by the Faculty of Arts and Sciences from any source in the consideration of this application shall be maintained, and these documents shall not be disclosed to anyone, including the candidate and his/her family, except by action of the dean in accordance with the provisions of the act and Rhode Island College policy. Once the admissions process has been completed the "educational records" only of enrolled students are forwarded to the Records Office and are available to the student upon request.