

**Clark State Community College**  
**Student Permission for Letter of Recommendation**

**Name of  
Student:**

**Social Security  
Number:**

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), I the undersigned, hereby authorize \_\_\_\_\_ to write a letter of recommendation or other supporting documentation in which he/she may reference the following educational records and information:

*Check all that can be released:*

- Grades
- GPA
- Classroom Performance
- Clinical Performance
- Attendance

I understand further that I have the right to receive a copy of the recommendation letter or other supporting documentation upon request and that this consent shall remain in effect until revoked by me, in writing, and delivered to Clark State Community College, but that any such revocation shall not affect disclosure previously made by Clark State Community College prior to the receipt of any such written revocation.

Student Signature:

Date: