



Student Reference Release and Authorization

Today's Date: _____

I, _____ am requesting _____
(requestor's name) (person being asked to provide the reference)

to provide a ___written___ verbal reference on my behalf to:
(check one or both)

(name, address, and phone number of person and organization to receive the reference).

By signing this release, I understand that I am authorizing the above-named individual to provide information to the third party designated above, that may be considered and protected as private and confidential, including but not limited to my official educational records, in whole, in part or by reference, as well as his/her opinions and observations about my character or other issues that may be relevant to my suitability for future academic, employment, or ministry opportunities for which I am being considered.

I agree to hold the individual being asked to provide the reference, and Cairn University, its officers, directors, employees, and agents, harmless regarding any and all legal claims that I may make or that may be made by a third party, resulting from my solicitation of this reference and the dissemination of this reference to others on my behalf, upon my request and authorization.

Requestor's Name (print)

Requestor's Signature

Requestor's Maiden Name (if applicable)

Requestor's University ID (if known)