



# RANDOLPH COLLEGE

*Founded as Randolph-Macon Woman's College in 1891*

## **Request for Letter of Recommendation**

(To be completed by student. Please type or print.)

**To:** \_\_\_\_\_  
(Name of person from whom the student is requesting recommendation)

**From:** \_\_\_\_\_  
(Name of student who is requesting recommendation)

**Major(s):** \_\_\_\_\_

**Concentration(s):** \_\_\_\_\_ **Graduation Date:** \_\_\_\_\_

This student has the option of waiving or retaining his/her right to view this recommendation under the terms of the "Family Education Rights and Privacy Act of 1974" **unless** he/she has signed the below.

**If you chose the option of having a "confidential file", sign and date below.**

\_\_\_\_\_  
**Signature of Student** **Date**

## **To be completed by Recommender:**

Letters of recommendation should be typed on letterhead stationery, preferably not to exceed one page in length. Please be sure you state the student's name on the page. Recommendations are photocopied from your letter.

\_\_\_\_\_  
Name Company/Institution

\_\_\_\_\_  
Title City/State/Zip

\_\_\_\_\_  
Signature Date

**Please attach your completed recommendation and kindly forward to:**

Experiential Learning Center – West Hall  
Randolph College  
2500 Rivermont Avenue  
Lynchburg, VA 24503-1526