

Carleton College

One North College Street
Northfield, Minnesota 55057

Advisory Committee on Health Professions Programs

AGREEMENT WITH STUDENTS AND ALUMNI(AE)

[The Family Educational Rights and Privacy Act of 1974 (Public Law 93-380) provides that all your educational records be open to you, including letters of reference. However, under that legislation, you have the option to waive that right of access; you may wish to do this if you feel that confidential reference letters would carry more weight than open ones.]

I authorize the Advisory Committee on Health Professions Programs to provide a reference for me. I realize that the reference may contain positive and negative components and agree to its release to those parties that I specify to the Committee. Furthermore,

_____ I hereby waive my right of access to the confidential information in letters of reference which I have requested

_____ I desire to retain my right of access to the confidential information in letters of reference which I have requested

This agreement is in effect until revoked in writing.

Signature _____

Date _____

Name (printed) _____