

**FERPA AUTHORIZATION  
TO RELEASE STUDENT'S INFORMATION OR REQUEST  
FOR LETTERS OF RECOMMENDATION**

**TO: Marquette University**  
**Department of Counselor Education & Counseling Psychology**

*(please check all that apply below)*

- write a letter or recommendation
- complete evaluation form
- release information verbally
- other (*specify*) \_\_\_\_\_

**TO:**  all potential employers  
 any educational institution  
 only to the following \_\_\_\_\_ (*specify*)

**For the following purpose:**  employment  
 admission to an educational institution  
 other (*specify*) \_\_\_\_\_

**I authorize you to consult my educational record at Marquette University to reveal such information from my educational record, as c**