



STONE PROGRAM

in Wealth Distribution, Inequality, and Social Policy

Letter of Recommendation Waiver Form

Applicants: Complete the section below, certifying that you waive or do not waive access to this letter, and submit this form with the rest of your application. This will serve as the official record on file.

Applicant's name _____
Name

Recommender _____
Recommender's name Recommender's department or affiliation

I understand that federal legislation provides me with a right of access to this recommendation, which may be waived, but that no school or person can require me to waive this right.

By selecting yes, I waive my right to access this letter of recommendation. ☐ No ☐ Yes _____
Date