

# University of Oregon

## Student Reference Request Form

**Instructions to students: Please complete this two-page form, sign and date, then mail, fax or hand deliver to the University of Oregon faculty or staff member from whom you are requesting the reference(s).**

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Student Name (please print)

University of Oregon ID Number

I request that \_\_\_\_\_ (referred to as "Employee" below) serve as a reference for me. This reference is for the following purposes(s):

**(Please check all that apply)**

- application/reference for employment       admission to another educational institution  
 all forms of scholarships or honorary awards  
 other (please specify) \_\_\_\_\_

The reference may be given in the following form(s):

**(Please check one or both)**

- written       oral

I authorize release of any and all information from my education records to the following:

**(Please check one)**

- all** prospective employers and educational institutions to which I seek admission, and all organizations considering me for an award or scholarship **OR**  
 **only** those specific employers, educational institutions or organizations listed on page 2 of this form  
 other \_\_\_\_\_

I understand and agree that this authorization will remain in effect until revoked by me, in writing, and delivered to Employee; however, any such revocation will not apply to previous disclosures. Further, I agree to release and hold harmless the Employee and the University of Oregon, from and against any claim related to any reference or information provided by the Employee or the University of Oregon.

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Signature of Student

Date

# University of Oregon

## Student Reference Request Form

Please list the names and addresses of all specific employers, educational institutions and/or organizations to which you authorize the release of information by the Employee:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip code: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip code: \_\_\_\_\_