

ACCESS/WAIVER FORM FOR STUDENT FILES AND RECOMMENDATION LETTERS
(required for all fellowship nominations)

Photocopy as needed. If faxed copy is submitted with the nomination materials to meet the deadline, please submit the original copy from the student as soon as it is received after that date.

Letter of Recommendation
Graduate School Fellowship

Public Law 93-380 permits students or alumni to have access to their files or to waive their right to see recommendations written concerning them after January 1, 1975. Please indicate your preference by signing one of the following:

- I understand that *Public Law 93-380* provides for access to my file, and I wish to retain my right to review the references under the conditions specified.

Date: _____

Signature: _____

- In accordance with *438 (a) (1) (B) (iii) of Public Law 93-380*, I hereby freely waive my right to access all letters of recommendation sent in conjunction with the nomination for a Graduate School Fellowship. I understand that these letters may not be used for any purpose other than evaluation of my qualifications for the fellowship, and that by signing this waiver, I retain the right to learn the names of any and all persons submitting such letters.

Date: _____

Signature: _____

The University of Kansas
Graduate Officer
Clinical Child Psychology Program
2010 Dole Human Development Center
1000 Sunnyside Ave
Lawrence, KS 66045-7555