

**LETTER OF REFERENCE
BRYN MAWR COLLEGE
Bryn Mawr, PA 19010**

To Be Completed by the Candidate

Candidate's Name

Graduation Date

Degree

Date (to be) Awarded

Major Field

Under the provision of the PA Right To Know Law and the Federal Family Educational Rights and Privacy Act of 1974
(must check one):

I RETAIN my right to review this letter,

OR

I WAIVE my right to review this letter

Candidate's Signature _____ Date _____

To the Author:

Please type your comments on this or an attached sheet and return this form directly to **Career Engagement, Bryn Mawr College, Bryn Mawr, PA 19010**. THIS FORM SHOULD NOT BE RETURNED TO THE CANDIDATE.

Name (typed) _____ Title _____

Organization _____ Telephone () _____

Address _____ Zip Code _____

Author's Signature _____ Date _____