Right of Access to Letter of Recommendation
Center for Emergent Materials Summer REU Program

Instructions to Applicant: Complete, sign and provide to your referee. If requested by a referee, this form must accompany the letter of recommendation that they write for you to be accepted into the Center for Emergent Materials Summer REU program at The Ohio State University. A separate form must be prepared for each referee.

I, ________________________________, give my permission to ________________________________ to write a letter of recommendation/evaluation of my qualifications for acceptance to the Center for Emergent Materials Summer REU Program. By signing below, I recognize that I am giving permission for this referee to discuss via telephone or any other electronic means (including e-mail) or via post my suitability for acceptance into this summer research program with representatives of the university on the review committee. In such written and electronic communications, I agree that this individual may (among other things):

- Discuss my academic performance (both generally and including specific grades) in course(s) taught by this professor, if applicable;
- Discuss all information provided to this referee on my resume, transcript and other materials I provide;
- Discuss this referee’s general and specific impressions of my qualifications for acceptance based upon the referee’s experiences working with me and the materials I provide him or her;
- Discuss all previous work experience and extracurricular activities.

☐ I hereby permanently waive my right of access to this letter of recommendation
☐ I do not waive my right of access to this letter of recommendation

__________________________________________  ________________________
Signature                                      Date