

LETTER OF RECOMMENDATION FORWARDING SERVICE APPLICATION



Health Professions Advising Office (HPAO) • Jensen Student Access to Science (SAS) and Mathematics Center

• Location: Faculty Office 5 Building – Room 109 • Phone: (562) 985-5720 • Website: www.sascenter.org/hpao

LETTER OF RECOMMENDATION FORWARDING SERVICE OVERVIEW

The HPAO allows CSULB students and alumni to store their letters of recommendation for their professional and graduate school application in our office. Future professional and graduate schools applicants will complete a Letter of Recommendation Forwarding Service Application to open a Letters of Recommendation File. Students must obtain original letters of recommendation from faculty and/or supervisors of relevant clinical, volunteer, community service, or work experience and submit them to the HPAO. All letters will be kept on file until the student requests that they be forward to professional schools, central application services, or graduate programs.

STUDENT INFORMATION

Date: _____ CSULB ID#: _____ Gender: Male Female
Last Name: _____ First Name: _____ Middle Name: _____
Major: _____ Minor: _____
Cell Phone: _____ Email: _____
Type of student: Undergraduate CSULB Alumni Post-Bac Masters

HEALTH PROFESSION(S) OF INTEREST:

Allopathic Medicine (M.D.) Optometry Physician Assistant
 Chiropractics Osteopathic Medicine (D.O.) Podiatry
 Dentistry Pharmacy Public Health
 Nursing Physical Therapy Veterinary Medicine

STANDARDIZED EXAM SCORES: (MCAT, PCAT, DAT, OAT, GRE, ETC)

Name of Exam: _____ Date taken or registered test date: _____
Total Score: _____ Sub-scores: _____

HPAO POLICY STATEMENT

Read the following sections and sign below.

GENERAL FILE INFORMATION

Duration:

- All files are closed 1 year after departure from CSULB. An e-mail will be sent to the last known e-mail address informing you that the file has expired and will be destroyed, unless you elect to keep the file active. It is the student's responsibility to maintain a current e-mail address via [MyCSULB](#).
- Expired files will be destroyed 6 months after expiration date.
- Files can be renewed on a year-by-year basis following graduation at the request of the student by completing a new application. If renewing a file, the current HPAO policy supersedes all others.
- Students may close their file at any time and any letters of recommendation on file will be destroyed.

CONFIDENTIALITY

Many graduate and professional applications require or prefer students to submit confidential letters of recommendation. For students who designate a confidential file, HPAO will collect the letters, stamp them "Confidential," and will not release any information pertaining to the contents of any letters in their file. Students who elect to have a non-confidential file will be able to inspect the letters submitted to HPAO on their behalf.

Under the *Family Educational Rights and Privacy Act of 1974*, students are entitled to read letters of recommendation written about them unless they voluntarily waive their right to do so. Students electing to use the Letter of Recommendation Forwarding Service are asked to designate their file as "confidential" by signing the Waiver and Release statement (on page 3) affirming or waiving their right to inspect letters submitted to HPAO.

Keep in mind to ensure the confidentiality of letters:

- All letters must have an original signature and be received in sealed envelopes with the author's signature across the seal.
- All letters submitted to HPAO become the property of the California State University, Long Beach and will be released to the original author and professional or graduate programs. If a student wants his/her letter sent to a scholarship, fellowship, or enrichment program, we must receive written consent from the author.
- HPAO cannot release individual letters of recommendation or sealed packet of letters to students to hand deliver for any reason.
- HPAO does not read or make recommendations pertaining to letters. HPAO does not modify letters in any way.

SUBMITTING LETTERS OF RECOMMENDATION

Once an application is complete, you can begin to ask for letters of recommendation. Authors from on- or off-campus can submit letters. Visit the HPAO website at www.sascenter.org/hpao and review the Letter of Recommendation Forwarding Service Instructions. It is the student's responsibility to follow-up with recommenders, to ensure that letters are prepared in a timely fashion.

Any processing of letters requiring handling that is not part of the standard services described above; including faxes or special deliveries is at the sole discretion of the Health Professions Advising Office.

I understand and agree to the HPAO policies outlined above.

Student Signature: _____ CSULB ID#: _____ Date: _____

WAIVER AND RELEASE STATEMENT FOR A CONFIDENTIAL LETTER OF RECOMMENDATION FILE

Read the following sections and sign below if you agree to establish a confidential letter of recommendation file.

I understand that the *Family Educational Rights and Privacy Act of 1974*, as amended, provides that current and former students may waive the right to inspect letters of recommendation and similar evaluation statements. I hereby waive this right, thus electing to establish a confidential file with the CSULB Health Professions Advising Office.

I understand and request, without limitation, that such letters be sent to health professional or graduate schools.

This Waiver and Release shall remain in effect unless and until the CSULB Health Professions Advising Office receives revocation from me, in writing. If I withdraw or revoke this waiver I understand that confidential letters in my file received prior to the revocation date will be withdrawn and destroyed or returned to the author, and I will not be permitted to inspect them.

I will provide the names of those persons whom I have requested to write letters or evaluations to the Health Professions Advising Office on my behalf. I realize that the references may be positive or negative and regardless of content, I forever discharge and release the State of California; California State University, Long Beach; and the California State University Board of Trustees and all of its and their servants, agents, and employees from any and all liability and causes of action whatsoever, now and in the future. This Waiver and Release shall be effective for me and my assigns, heirs, and administrators.

I understand that I am not required to waive my right of access to the materials submitted as a condition of receipt of any service or benefit provided by the campus, and that this Waiver and Release does not preclude my requesting the names of those individuals who provide confidential statements or evaluations.

Student Signature: _____ CSULB ID#: _____ Date: _____

OFFICE USE ONLY

• Date Entered in Access: _____ • Staff Initials: _____