

Reference Form

St. Vincent's College
2800 Main Street, Bridgeport, CT 06606
(203) 576-5651
www.stvincentscollege.edu

Two (2) Reference Forms are supplied. Please distribute the forms to the persons (not relatives or personal) you have selected and request that they be mailed directly to the College.

For recent high school graduates:

An applicant must submit three (3) references: one each from English, Math and Science teachers.

NAME OF APPLICANT: _____

WAIVER

Under the Family Educational Rights and Privacy Act, we are permitted to request, but not require, that you waive your right to inspect reference letters. The right would arise if you were an enrolled student at this school and if the references were maintained after your enrollment. In considering whether you will waive, please be advised that the information will be used to evaluate you as an applicant for admissions to St. Vincent's College. If you elect to waive your rights of access to and review this information, please sign your name.

(Signature of applicant)

Please describe the applicant's special strengths/attributes, which would contribute to his/her success in a health care profession:

