

**Residential Life  
RA Application**



RECOMMENDATION LETTER FORM

Name of Applicant \_\_\_\_\_

WAIVER OF ACCESS TO RECOMMENDATION

I hereby waive my right under the Family Educational Rights Privacy Act of 1974, as amended, to inspect or review this letter or statement of recommendation submitted by a staff member or outside source.

I certify that this waiver is given voluntarily by me.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

I do not waive my rights to review this recommendation.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Name of Evaluator \_\_\_\_\_

Title \_\_\_\_\_ Telephone # \_\_\_\_\_

***Please attach a letter of recommendation to this form.***

*As part of our Resident Assistant Selection process, we are seeking information from individuals who know the applicant. **The responsibilities include community building, programming to enhance the educations and social development of students, interpersonal communication, assisting with administrative functions, and knowing appropriate resources available on campus.** Please attach a letter of recommendation to this form and return to the Residential Life Office located upstairs in the Student Center. As the Evaluator you have the right to provide this form privately via hard copy or email submission. Email submissions may be requested by University email at [housing.up@uprovidence.edu](mailto:housing.up@uprovidence.edu).*