

**The University of Iowa
Department of Philosophy
Recommendation for Graduate Admission**

To be filled in by applicant (please type or print)

Name of Applicant

Degree Program

Federal law gives students the option to waive their right to see letters of recommendation written on their behalf. If the applicant signs the waiver below, the letter will be held confidential. If it is not signed, the applicant retains the right to see the letter.

WAIVER: In accordance with the Family Education Rights and Privacy Act of 1974, I waive my right to review this letter.

Signature

Date

Please assess the qualifications of the above-named student to do graduate work in philosophy. Use the space below, or an additional page if needed, and return to Director of Graduate Studies, Department of Philosophy, 269 EPB, The University of Iowa, Iowa City, Iowa 52242-1408.

Name (Please Print)

Signature

Title

Address

Date

City

State

Zip