REQUEST FOR A COMMITTEE LETTER OF RECOMMENDATION

Rosalind Adgers, Health Professions Assistant and Credential Service Coordinator
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Name__________________________________________________________Class Year________
First                      Middle                      Last

Wes ID#____________________Cell Phone____________________________Email_____________________

I hereby authorize the members of the Wesleyan Health Professions Panel to prepare a Health Professions Committee Letter for my application to ________________________ (INDICATE Medicine, Dentistry, Veterinary). I have read and understand the information regarding the purpose and construction of the Committee Letter and accept the conditions under which a letter is prepared and distributed. Go to http://www.wesleyan.edu/careercenter/students/health/index.html

I understand that I am waiving my right to see the letter and that the letter - in its entirety or any portion thereof - will not be made available to any party other than (1) members of the Health Professions Panel and (2) members of admissions committees at health professions graduate schools where I am applying and have specifically requested, in writing, that the letter be sent. I understand that the purpose of this waiver is to protect my privacy as an individual, to assure the integrity of the committee letter process, and to strengthen the credibility of the letter written on my behalf. I have asked any questions that I may have about the committee letter and the process involved in its generation prior to signing this waiver.

I hereby request that a Committee Letter be prepared on my behalf and waive my right of access to this letter.

_________________________________________  _______________________
Signature                                      Date

I am requesting an official transcript from Wesleyan and the following colleges or universities:

_________________________________________  __________________________________
_________________________________________  __________________________________
_________________________________________  __________________________________

I am requesting letters of recommendation from the following individuals (Listed Below). I will notify Rosalind Adgers, of any change in recommenders. I am responsible for monitoring the receipt of letters on my behalf via veCollect. Three letters of support must be on file by 12 March 2020 in order to receive a committee letter. You may receive up to six letters of support.

_________________________________________  __________________________________
_________________________________________  __________________________________
_________________________________________  __________________________________

_________________________________________  __________________________________