



LETTER OF REFERENCE

Reference writer: This is one of several letters which the undersigned may request for inclusion in a credentials file to be held in this office. Copies will be mailed to prospective employers/graduate schools.

Name of candidate: _____ Graduation month: _____ Year: _____

I _____ waive my rights to access this letter of reference. (optional)

Candidate's signature: _____

Date: _____

Please attach your reference file via .pdf, on your official letterhead. Submit to: Career@Potsdam.edu

Format: "CandidateLastName-CandidateFirstName-RefLtr.pdf"

Confidential: Yes No

Faculty: _____

Staff: _____

Other: _____

Name of Evaluator _____

Title: _____ Telephone _____

Signature: _____ Date _____

Please return to:

SUNY Potsdam

Career Services

107 Crumb, 44 Pierrepont Avenue

Potsdam, NY 13676

Phone: (315) 267-2507, Fax: (315) 267-2811