

**University of Washington School of Aquatic & Fishery Sciences**  
**Graduate Applicant Recommendation**

**Please return by December 15th to:**  
**STUDENT SERVICES OFFICE—GRADUATE STUDENT ADMISSIONS**  
University of Washington School of Aquatic & Fishery Sciences  
Room 116 Fishery Sciences/Box 355020  
Seattle, Washington 98195-5020  
Telephone 206-616-5893; FAX 206-616-8689; safs@u.washington.edu

Please comment here (or in an attached letter) on the student's preparation for graduate work, motivation, oral and writing skills, demonstrated and potential creativity, and overall potential for success in graduate school.

**Graduate Applicant:** Please fill out the following waiver.

I understand that Federal law provides me, after enrollment, with a right of access to this Letter of Recommendation and that no school may require me to waive this right.

I hereby waive  do not waive  my right of access to this Letter of Recommendation.

\_\_\_\_\_

Date

\_\_\_\_\_

Applicant's Signature

\_\_\_\_\_

Printed Name

Signature of Referee: \_\_\_\_\_

Printed name: \_\_\_\_\_

Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Date: \_\_\_\_\_

Phone or email: \_\_\_\_\_