



UNM-Gallup Nursing Program
705 Gurley Ave. Gallup, NM 87301
P: (505)863-7514 F: (505)726-6307
W: www.gallup.unm.edu/nursing

Student Authorization for Release of Reference Information And Letter Request Form

Preferred salutations: ☐ Mr. | ☐ Ms. | ☐ Mx. Student Name: _____

UNM Banner #: _____

Current Student: ☐ Yes ☐ No Dates of Attendance: _____

I am requesting a:

☐ Reference Letter

☐ Work/Employment _____

☐ Scholarship _____

(Please attach a copy of the scholarship description.)

☐ Other _____

☐ Enrollment Verification

I hereby give permission for _____ to supply the following
(UNM-G Nursing Faculty or Staff Member)

information to _____ at _____
(Name of Recipient) (Organization)

If the requested letter must be sent directly from the program to the organization, please include their mailing or email address.

Please release the following information concerning my educational records:

☐ General summary of performance; ☐ Nursing course grades; ☐ GPA

Preferred pronouns: ☐ He/His/Him; ☐ She/Her/Hers; ☐ They/Them/Their; ☐ Ze/Zir/Zirs

Other topics I hope you will include about me in the letter, phone call, or email:

Please Select One:

☐ USPS Mail to specified recipient directly

☐ Email to specified recipient directly

Email address: _____

☐ Student will pick up letter themselves
Phone Number to call when letter is ready: _____

*****Please Note: There is a two week turnaround time for all correspondence requests.*****

*****Provide additional comments and information on the back of this sheet if needed.*****