

**LACA SCHOLARSHIP APPLICATION  
AUTHORIZATION FOR RELEASE OF APPLICANTS ACADEMIC  
RECORDS AND RESUME AND WAIVER OF RIGHT TO DISTRIBUTE  
AND REVIEW**

The purpose of this form is to give the members of the LACA Scholarship Committee access to the contents of my application for a merit based scholarship.

I understand and agree that:

- a) The Family Educational Rights and Privacy Act requires that I give permission for all information in my application and letters of recommendation to be disclosed, used and discussed by the scholarship committee.
  
- b) If I am selected to receive a scholarship, I grant permission for the scholarship committee to present my biographical information to the financial supporters/funders of my scholarship and to those present at the scholarship awards ceremony during the LACA annual meeting.

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Student Signature

## WAIVER OF RIGHT TO REVIEW MATERIALS

I understand that I have the right to review the letters of recommendation written in support of my application unless I waive this right in writing by signing below the waiver statement.

I waive all my rights to review my letters of recommendation. I understand that recommenders may choose to provide me with a copy of their letter, and that this is a courtesy by the author. I do not waive the right to accept a copy of a letter of recommendation that may be given to me by the author.

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Student Signature

## STUDENT CERTIFICATION

I certify that all of the information in this application is accurate and honest and is my own work.

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Student Signature

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Date