This form is to be used by applicants who do not use the LSDAS Letter of Recommendation Service but who have chosen instead to have their recommendations submitted directly to the School of Law.

The applicant should complete Sections A and B or C below before giving a form to each person providing a recommendation. The recommendation writer should complete section D.

Section A
Applicant’s Name: ______________________________________________________

Applicant’s LSDAS Number:    L _________________________

Section B
I authorize release of a candid evaluation to assist in the admission selection process and, if I enroll, for counseling or other educational purposes of the George Mason University School of Law. I understand that the material will be kept confidential both from me and from the public, and I waive any right of access that I might have by law. I further understand that the George Mason University School of Law does not require me to execute this waiver and is willing to review my application without such a waiver.

___________________________________________________ __________________
Signature of Applicant      Date

Section C
I authorize release of a candid evaluation, but I choose not to waive my right to examine this letter of recommendation should I enroll as a student at the George Mason University School of Law.

___________________________________________________ __________________
Signature of Applicant      Date

Section D
To the recommendation writer: Please complete this section and include a brief written evaluation of the applicant on the next page. Please be sure that you complete the signature block. Thank you for your assistance.

1. How long have you known this applicant?   _____________________________

2. What has been the nature of your relationship with this applicant?
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

(Continued on page 2)
Please use this space to provide an evaluation of the applicant, including observations of the applicant’s intellectual ability, academic performance, character, and promise for the study of law. Please include reference to any specific events, impressive accomplishments, or unusual circumstances that may give us added insight to the strengths and weaknesses of this applicant.

Name of person providing recommendation: ____________________________________________

Position/Title and Organization

Address

Signature __________________________ Telephone Number __________________________

Please forward this completed form to:

   George Mason University School of Law
   Office of Admissions
   3301 Fairfax Drive
   Arlington, VA 22201

If this form is returned to the applicant for forwarding to the School of Law, it must be in a sealed envelope, bearing the signature of the recommendation writer across the sealed back flap. Thank you.