



Request for Letter of Recommendation

Name: _____
(First) (Last) (Today's Date)

Address: _____
(Street) (City) (Zip)

Phone: (____) _____ Email: _____

10 Digit USC Card # (not your SS#): _____

List JEP Semesters (example: Fall 1995) _____

Person/Organization Receiving Letter: _____

Please Check
Off Choice

To be sent to your address at the top. []

To be sent to person/org named above. []

Will be picked up at the JEP House. []

Date Needed: _____
(Please allow 3 to 5 working days from date of initial request to mail)