

Applicant Name \_\_\_\_\_ Email \_\_\_\_\_  
SVU \_\_\_\_\_ Term: Fall / Spring 20\_\_\_\_

# SVU Dean of Students Approval Form

## To the applicant:

This is a confidential letter of reference to ILP. The Approval Form should be given to the Dean of Students office.

**References submitted by the applicant will not be accepted. References may not be completed by family members. Submitting this reference constitutes agreement to waive your right to see it after completion.**

## To the Dean of Students:

- Please be aware that the applicant will not be considered for a position until your letter of reference is received by ILP. Letters may be faxed or mailed to ILP.
- If you have questions or concerns regarding this reference, please call and speak with a director.
- Please check one of the following options, add any additional comments, and sign below.

### OPTION 1

The student named above **has been approved** by the Dean of Students office to participate in the SVU-ILP Travel Study program.

OR

### OPTION 2

The student named above **has NOT been approved** by the Dean of Students office to participate in the SVU-ILP Travel Study program.

Please add any additional information or comments below that will help in evaluating this student's application to participate in the SVU-ILP Travel Study program.

Signature \_\_\_\_\_ Date \_\_\_\_\_