

GVSU PRE-PROFESSIONAL PROGRAM

File Waiver Form

Name of Applicant Student G Number		Professional Program Entering Class year	
		Academic major/minor	
Date	 Email	Phone	
Pursuant to th	e Family Educational Rights a	nd Privacy Act (FERPA – Buckley Amendment	
(1974);			
required	to waive your right of access to c	y Rights Act, 20 U.S.C. 1232(g), you may, but are not confidential references given for any of the purposes listed coess, the waiver remains valid indefinitely.	
I waive n	ny right of access to review my	application file and the letters submitted to my	
applicati	ion file as maintained in the He	alth Professions Advising office. I give my permission	
that thes	se letters can include my grades	s, my GPA and/or my class rank.	
I retain r	ny right of access to review my	application file and the letters submitted to my	
applicati	ion file as maintained in the He	alth Professions Advising office. I give my permission	
that thes	e letters can include my grades	s, my GPA and/or my class rank.	
Signature:			
Printed name:			



Application and Personal Statement Use Waiver

(name)	
(address)	
University (GVSU) permissio	dvising Center in the College of Liberal Arts and Sciences of Grand Valley State on to duplicate and use the following material(s) for use in examples for future formation will be removed prior to distribution to other applicants):
Professional Scho	ool Application including personal statement, and related activity descriptions. nt.
Period of Intended Use	Perpetual
Purpose of Use	Educating fellow applicants by sharing examples of previously submitted applications (in whole or part).
my above described intellectu	ture I am giving GVSU a non-exclusive permissive license to use, without limitation, al property for use in their educational materials. I further understand that my work usly, with all identifying information blacked out or removed.
By my signature I affirm the t copyrighted item(s) described	erms and conditions set forth above and that I am the true and lawful owner of the .
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