

Farmingdale State College

Recommendation Release Form

School of Business Internship Program

Instructions: Please complete, sign and return to the Internship Coordinator.

Internship Coordinator Release:

I give my permission to the School of Business Internship Coordinator to provide the exceptional skills and qualities listed on my letters of recommendation to potential internship employers.

RAM Number: _____

Student's Signature:

_____ Today's Date: _____

Lisa Lubrano
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School of Business
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