

**TEXAS A&M UNIVERSITY-COMMERCE
DEPARTMENT OF SOCIAL WORK**

REFERENCE LIST FORM

REFERENCES: Please give the name and addresses of three references who are not relatives or personal friends. One must be an undergraduate professor or supervisor of paid or volunteer placement.

1. _____
Full Name Capacity in which known

University/Firm/Agency

Street or P.O. Box City State Zip Code

2. _____
Full Name Capacity in which known

Street or P.O. Box City State Zip Code

3. _____
Full Name Capacity in which known

Street or P.O. Box City State Zip Code

Privacy Policy

State law requires that you be informed of the following:

- (1) You are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law);
- (2) You are entitled to receive and review that information; and
- (3) You are entitled to have the information corrected at no charge to you