

## AUTHORIZATION TO RELEASE INFORMATION

In accordance with the Family Educational Rights and Privacy Act (FERPA), the college will not provide information contained in student records in response to inquiries unless the student has given written consent to the College.

The student should allow a minimum of two weeks for faculty to write letters of reference.

By signing this document, I \_\_\_\_\_ hereby authorize

- Any Nursing faculty or staff member, or
- Only the following instructor(s):

at Walla Walla Community College to release the following reference information to

- Any prospective employer
- Any educational institution to which I seek admission
- Any organization considering me for a scholarship or award
- ONLY the following agency/person(s):

**Date of Release:**

- Indefinite
- For this specific time frame \_\_\_\_\_ through \_\_\_\_\_  
(Enter start date here):

**I authorize release of the following levels of information (check one of the following):**

- Student level of completion only (no information on performance)
- Program performance information, including level of completion

**I authorize the reference to be given (Check all that apply):**

- By written request
- By verbal request

**If you would like a written reference letter, please provide the following information:**

Name:

Agency:

Address:

**Letters for scholarship:**

Please indicate the name of the scholarship and a brief summary of why you think you should be selected for the award.

**Letters for prospective employers:**

Please indicate who you want the letter addressed and/or what job you are applying for and how you may be uniquely qualified for the position:

**Is there any additional information you think would be helpful?**

**Student E-signature:**

**Date:**

**Student ID Number:**