



Waiver to Allow Release of Information to a Third Party

This form **must** be notarized.

I, _____, consent to the disclosure of any information in my Catawba Valley Community College student record (including personally identifiable information to the following party. My CVCC student ID number is _____.

Full Name: _____ Relationship to Student: _____

Information regarding the above student will not be sent on an on-going basis. Request for information **must** be initiated by the third party. Third party request must be accompanied by the form and a valid government issued photo ID (driver's license) or the request **will not** be honored.

Signature of Student: _____ Date: _____

Notary Public in _____ County and for the State of _____.

I certify that the following person(s) _____ personally appeared before me this day, each acknowledging to me that he or she is the person(s) described in and who voluntarily signed the foregoing document: Waiver to Allow Release of Information to a Third Party.

Witness my hand and official seal hereto affixed

This _____ day of _____, _____.

(Official Signature of Notary)

My Commission expires _____.