

Release of Information Form

SOUTHERN CRESCENT TECHNICAL COLLEGE ADULT EDUCATION PROGRAM

SCTC is authorized to release my student records, attendance information, and any other information regarding my enrollment in the Adult Education Program. Written or verbal, this information may be given to the individual or business named below. There is a minimum 48 hour turn-around-time. Exceptions to the turn-around-time policy must be approved by an Adult Education Administrator.

State issued photo I.D. or current Student I.D. is required at time of pick up.

(Student must be currently enrolled and have a minimum of 40 hours of instruction to receive proof of enrollment.)

Name at Time of Enrollment: _____

Current Name (if different than above): _____

Please Check One: Current Student Previous Student

Date of Birth: _____

Phone Number: _____

Current Address: _____

City/State/Zip: _____

Individual or business to which information is to be released:

Attention (if in a particular office): _____

Person, Agency, Co., or School: _____

Address: _____

City/ST/Zip: _____

Phone Number: _____

Type of Request: _____

STUDENT SIGNATURE: _____ **DATE:** _____