## **AUTHORIZATION FOR RELEASE OF INFORMATION Carefully read this authorization to release information. All lines in this** form must be answered or this authorization is invalid.

| Individual One (Print Full Name)          | Relationship to Student                      |
|---|--|
| Security Question for Individual One      | Response to Security Question Individual One |
| Individual Two Optional (Print Full Name) | Relationship to Student                      |
| Security Question for Individual Two      | Response to Security Question Individual Two |

**Purpose of Disclosure**