



Office of the Registrar • 518 West Locust Street • Davenport, Iowa 52803

Consent to Release Education Information

St. Ambrose University shall obtain written consent from students before disclosing any personally identifiable information from their education record. Such written consent for disclosure must: (a) specify the record(s) to be released; (b) state the purpose of the disclosure; (c) identify the party or class of parties to whom disclosure may be made; and (d) be signed and dated by the student. All such consents shall be maintained in the student's education record.

I hereby consent to the release of my St. Ambrose University educational records as stated below:

Specific records to be released:

Purpose for the release:

Information should be released to (provide name, mailing address):

Signature: _____

Date: _____

This release form does not provide for blanket releases and must be completed for individual requests.