

Student Affairs—Admissions/Records/Enrollment Services
4501 Amnicola Hwy., Chattanooga, TN 37406-1097
Phone: 423-697-4401 Fax: 423-697-4709

Authorization to Disclose Academic Information to Parent/Third Party

Student Name (please print): _____
Last First Middle

Date of Birth: ____ / ____ / ____ **SSN/Student ID:** _____

Release To: _____

Street Address: _____

City: _____ **State:** _____

Zip Code: _____ **Phone:** (_____) _____

Educational Record Information to be Released: (Describe in detail the purpose of this release)

I give permission for Chattanooga State Community College to release the specified information to the recipient listed above.

Student Signature: _____ **Date:** _____