

BBBBBB \$HFRUGV  
 BBBBBBB 2WKHU VSHF  
 BBBBBBBBBBBBBBBBBBBB

BBBBBB 9HWHUDQV† , QIRUPDWLRQ

FERPA requires that you state the purpose of the disclosure(s):\_\_\_\_\_.

7KH DERYH LQIRUPDWLRQ PD\ EH UHOHDVHG LQ SHUVRQ'S RELEASE Q ZULW  
 confirmed my social security number, date of birth, and/or other specific identifying information that may be  
 requested \$GGLWLRQDO QDPHV DWWDFK DGGLWLRQDO SDJHV

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, XQGHUVWDQG WKDW WKH DERYH LQIRUPDWLRQ LV FRQVLGHUHG SU  
 FRPSOHWLQJ DQG VLJQLQJ WKLV IRUP , Under OLR HWKESD W@GV FLDWRIG  
 , QIRUPDWLRQ FDQQRW EH UHTXHVHG RU EH UHOHDVHG YLD WKH LQ  
 , XQGHUVWDQG WKDW , KDYH WKH ULJKW QRW WR FRQVHQW WR WKH  
 FRS\ RI VXFK UHFRUGS NOT Tax Authority others to drop classes on my behalf.

This form must be submitted in person, by mail, or by FAX, with picture iit drop clt\_m >>a t dr onto fnItSherire,  
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