

Consent to Release of Student Education Records

,, [STUDENT NAME] hereby authorize the University of Utah to
release my education records to, and to discuss those education records with,
the following named person(s): [person(s)/entities to receive records]

I am authorizing the release of my education records for the following	5
purpose(s): [description of purpose]	

The specific education records that may be released by the University of Utah are described as follows: [DESCRIPTION OF EDUCATION RECORDS]

I understand that, upon request to the University of Utah, I am entitled to receive a copy of the foregoing records that are released pursuant to this consent.

This consent will expire on: _____

Signed: [STUDENT SIGNITURE]	Date	: