



To update any person listed, please submit a new Permission to Release Information Form to the International Student Center. Please type or write legibly in blue or black ink.

STUDENT INFORMATION		
<b>Last Name (Surname):</b>	<b>First Name:</b>	<b>Middle Name:</b>
<b>Date:</b> (MM/DD/YYYY)	<b>LATTC Student ID Number:</b>	
<p><b>By signing this form below, I certify that I give LATTC permission to release my personal information to the following people/organization:</b></p>		
<b>Last Name, First Name(s):</b>		<b>Relationship:</b>
1.		1.
2.		2.
3.		3.
4.		4.
5.		5.
<p><b>I give permission to only release the following information (check all that apply):</b></p>		
<p><input type="checkbox"/> Immigration Records (i.e.: copies of my I-20, information about my I-20 status, etc.)</p> <p><input type="checkbox"/> Academic Records (i.e.: copies of transcripts, information about my grades, etc.)</p> <p><input type="checkbox"/> Other (please describe): _____</p>		
Student Acknowledgement		
<p>I give LATTC permission to release this information to the people state above. They will be asked to present a valid identification before my information is release. <u>If I want to make changes to this permission request, it is my responsibility to inform LATTC of these changes in writing.</u></p> <p>This form is only valid while the student is active at LATTC. The listed people will not have access to any record/file <u>after</u> above named student is no longer a student at LATTC.</p>		
<b>Student Signature:</b>		<b>Date:</b> (MM/DD/YYYY)

OFFICE USE ONLY	
<b>Processed by:</b>	<b>Date:</b>