

College of the Redwoods Klamath-Trinity Instructional Site
& Hoopa Career And Technical Education Program
Release of Information Form



Student Name: _____ Student ID: _____

I, hereby consent to, and request, that any information on my academic progress including assessments, transcripts, student education plans, petitions, financial aid, and similar matters regarding my enrollment with College of the Redwoods and the Hoopa Career And Technical Education Program be released to:

(Name of Individual/Agency)

Further, I understand that the personal information I provide or authorize the above listed program staff to access is protected by the Privacy Act. This consent will remain in effect until I rescind my consent in writing or I complete my education with College of the Redwoods and the Hoopa Career And Technical Education Program.

Student Signature

Date