

University of Southern Indiana College Achievement Program 8600 University Blvd. Evansville, IN 47712 812-228-5022 812-465-7061 (FAX)

Authorization to Disclose Grades/Academic Progress of a CAP Student

Requested by (Student):		Release To (Recipient):	
First name	Last name	First name	
USI Student ID number		Relationship to student	
	Address		
	First name	First name Last name mber Relationship to	

City, State, Zip

In compliance with the *Family Educational Rights and Privacy Act of 1974*, the University of Southern does not release grade or academic progress information without student consent. This information is considered confidential. Therefore, if you wish to allow your CAP instructor to discuss your CAP grade or CAP academic progress with your parents or other designee, you must sign this form and return it to your instructor.

I authorize my CAP instructor to discuss my CAP grade and/or CAP academic progress with the person(s) indicated above. I understand this consent will remain in effect until rescinded by myself.

Student Signature	Date

Instructor: please keep a copy for your records and submit the original copy to the CAP office (address above).