

## **STUDENT DISCIPLINARY RECORDS RELEASE OF INFORMATION**

I, \_\_\_\_\_ (print name), give the Office of Student Rights and Responsibilities my permission to release information regarding my disciplinary status at Arizona State University to Cassandra Aska.

By presenting a signed and dated copy of this consent to Arizona State University, the student consents to the release by ASU of the records to the authorized person(s). The student further agrees that ASU may discuss the information contained in the records with the authorized persons. This consent applies to educational records that may otherwise be protected under the Family Education and Privacy Act of 1974, as amended, 20 U.S.C. 1232g.

Signature \_\_\_\_\_ Date \_\_\_\_\_