

## **Release of Information**

Send requested information: Student Access Services (SAS), New Mexico Tech, 801 Leroy Place, Fidel Center 245, Socorro, NM 87801 or email access@nmt.edu

I, \_\_\_\_\_\_ agree to allow New Mexico Tech Student Access Services to:

RELEASE:
The following information pertaining to my disability: \_\_\_\_\_\_

TO: NAME of Individual(s) or Agency: \_\_\_\_\_\_

OBTAIN:
The following information pertaining to my disability: \_\_\_\_\_\_

FROM: NAME of Individual(s) or Agency: \_\_\_\_\_\_

Student Signature 900# Date

This release of information will expire when the student is no longer enrolled at NMT or with the written notification from the student.

