



Authorization to Release Confidential Student / Apprentice Records

I hereby authorize Northwest College of Construction to release confidential information contained in my student and/or apprenticeship records. I agree to hold NWCOC and its employees harmless for any unauthorized use of my released records.

STUDENT / APPRENTICE INFORMATION:

Name: _____
First Name Middle Initial Last Name

Address: _____
Street Address

City State Zip Code

Phone Number: _____ Email: _____

RELEASE INFORMATION TO:

Organization Name: _____

Address: _____
Street Address

City State Zip Code

Phone Number: _____ Email: _____

RECORDS TO BE RELEASED: check all that apply

- | | |
|---|--|
| ☐ All Student / Apprenticeship Records | ☐ Personal Contact (Phone Address) |
| ☐ JATC Correspondence | ☐ Copy of MPR's |
| ☐ Transcripts/Grades | ☐ On-the-Job and Related Training Hours |
| ☐ Tuition Payment History | ☐ Program Name |
| ☐ Employment History | ☐ Program Start and End Dates |
| ☐ Wage Information | ☐ Section 3 information |
| ☐ Class Attendance/Schedule | ☐ Other: _____ |

Release will remain in effect for 5 years from the date of signature unless revoked in writing.

Signature: _____ Date: _____