

University Housing Permission for Release of Information

UNIVERSITY HOUSING

University of Wisconsin - Milwaukee will not release any information to any private individual and most agencies without your written permission - unless legally required.

I, _____ UWM Student ID Number _____
(print name)

give permission to University Housing to release to the following people:

- 1) Name: _____ Relationship: _____
 2) Name: _____ Relationship: _____
 3) Name: _____ Relationship: _____

I hereby grant the above people to have access over the phone, in person, by mail or by email to the following records:

- _____ All Behavioral Information*
(initial)
- _____ Contract Probation
(initial)
- _____ Deferred Contract Termination
(initial)
- _____ Contract Termination
(initial)
- _____ Resident Standing
(initial)
- _____ All Financial Information*
(initial)
- _____ Account Status.....
(initial)
- _____ Copy of Acct. Activity Report (Parents/Guardian Only)
(initial)

Office Use Only
Yes / No
Yes / No
Yes / No
Good Standing: Yes / No
Paid in Full: Yes / No
Staff Initials & Date:

Signature: _____ Date: _____

Contact Phone Number: (_____) _____

This release of information is good for one year from date above, or until the student requests it be removed from file.

*Staff member completing this form with student must explain full extent of "All Information"