

Confidentiality Waiver

Dean of Students Office
227 Whitmore Administration Building
181 Presidents Drive
Amherst, MA 01003-9313
voice: 413-545-2684
fax: 413.545.9704

Please select which student record(s) this waiver applies:

Student Conduct

Student Life

Student Name

ID #

Email

Phone

I hereby authorize the Dean of Students Office/Residence Education staff to discuss my student record with the below listed individuals:

Name

Role/Relation to student

Phone

Name

Role/Relation to student

Phone

Name

Role/Relation to student

Phone

I understand that this permission will be in effect until revoked by me, in writing, and delivered to the Dean of Students Office, but that any such revocation shall not affect disclosures previously made prior to the receipt of any such written revocation.

Student Signature

Date

This information is released subject to the confidentiality provisions of appropriate state and federal laws and regulations which prohibit any further disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by such regulations.

UMassAmherst

Dean of Students Office