

INDIANA UNIVERSITY KOKOMO

SCHOOL OF NURSING

Authorization for Release of Information

To be signed each time release of information is requested

When a student requests a faculty member write a letter of recommendation for employment, scholarship, award, or other reasons,

The student will:

- A. Sign a copy of this form and give it to the faculty person who is being asked to write the recommendation.
- B. Contact the IUK Placement Office when applying for employment and follow their procedures.
- C. Recognize the fact that a faculty person has the right to refuse to write a letter of recommendation.
- D. Not request recommendations over the telephone.

The faculty member will:

- A. Place a copy of the signed release form and of the letter of recommendation in the student's permanent record file.
- B. Refuse to give recommendations over the telephone.

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize Indiana University Kokomo to furnish records or transcripts of my grades, honors, or achievements they may have concerning me. I also release any individual, school, or institution, its officers, agents, and employees from any liability for any damage whatsoever for issuing such information.

I hereby give my permission for _____
(write in name of individual requested to give recommendation) to provide written information regarding my achievements while attending Indiana University Kokomo.

Name _____

Date _____

Approved 5/96

