



College of Business Administration

LEADERSHIP FOR THE GLOBAL MARKETPLACE

Academic Record Release

____/____/____
Date

I _____ , _____
First Name Last Name REDID

give permission to _____ to discuss my
First Name Last Name

academic record with _____.
First Name Last Name

Signed _____

Student's written permission is required for discussions between faculty (and/or staff) and any persons other than the student in question which may involve the academic record.