



**Student centered.
Community focused.**

Release of Information Authorization Form

Student's Name

Student's EMPL ID number

I hereby give the ELI student services personnel authorization to release to

_____ the following information from my
Name

academic record:

_____ Grades for any or all courses
Initials

_____ Grade(s) for only the following course(s):
Initials

_____ Assignment verification
Initials

_____ Course materials
Initials

_____ Registration permission
Initials

for the purpose of _____.

Student's signature

Date

Extended Learning Institute
Telephone (703) 323-3347 V/TDD (703) 323-3717 FAX (703) 323-3392
8333 Little River Turnpike · Annandale, Virginia 22003-3796 · <http://eli.nvcc.edu>

NORTHERN VIRGINIA COMMUNITY COLLEGE