

CONFIDENTIALITY WAIVER

I, _____, hereby give permission for the Office of Community Expectations to discuss my current case (including relevant disciplinary history) with the following individuals:

Print Name

Relationship

Print Name

Relationship

Print Name

Relationship

Print Name

Relationship

I understand that such information is confidential and a written waiver of confidentiality is required of me in order for the issue to be discussed with the persons listed above. Accordingly, I hereby waive my right to confidentiality in reference to the individuals listed above by signing this document.

Print Name

Signature

Student ID number

Date

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