

# MISSOURI SOUTHERN

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## STATE UNIVERSITY

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### OFFICE OF THE REGISTRAR

#### Authorization to Release Non-Directory Information

The electronic or paper copy of this form is to be used by non-currently enrolled students and be accompanied with a copy of government-issued identification. Currently-enrolled students should use the online version accessible on the MSSU Office of the Registrar Online Forms page [www.mssu.edu/registrar](http://www.mssu.edu/registrar).

I hereby authorize Missouri Southern State University to release specific/other or all educational records which include records kept by the following offices, if applicable: Mental Health/Counseling records, Health Center records, Disability Accommodation Services, Project Stay, Athletics Department, Veteran Services, MKEAP, Honors Program, Global Leaders, MOSO CAPS, and other programs you are involved in. Cross out and initial any records you don't want released.

List specific/other records requested: \_\_\_\_\_

\_\_\_\_\_

Release to (Name): \_\_\_\_\_

Recipient's Street Address: \_\_\_\_\_

Recipient's City, State, and Zip Code: \_\_\_\_\_

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Student Name (Print): \_\_\_\_\_ Student MSSU ID No.: \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

**This authorization will be effective the date the request is received in the Office of the Registrar until a written letter revoking it is received.**

Office of the Registrar Use Only

Processed by \_\_\_\_\_ Date Delivered/Sent \_\_\_\_\_