HIBBING COMMUNITY COLLEGE
Authorization for Release of Information

_____ _____
LAST (Please Print) FIRST MI STU ID #

I hereby authorize **Hibbing Community College** to obtain, release, and/or exchange information with the individual/agency below:

_____
Name of Individual, School, or Organization

_____
Address City State Zip

The specific records covered by this release are (select with checkmark):

_____All
_____Billing Information
_____Financial Aid Information
_____Grades/Transcripts
_____Housing
_____Registration/Class Schedule
_____Previous coursework
____ Other_____

ACKNOWLEDGEMENT OF UNDERSTANDING:

- I understand that by signing this Informed Consent Form, I am authorizing Hibbing Community College to release to the persons named above and their representative information which would otherwise be private and not accessible to them.
- Upon fulfillment of the above stated purpose(s), this consent will automatically expire one year following the date of signature without my express revocation, unless otherwise specified.
- I understand that I may revoke this consent to release of information at any time by written notice, except when legal action prevents revocation (subpoena) However, any release made in good faith prior to receipt of revocation, shall be deemed valid.
- I understand that a photocopy of this authorization may be treated in the same manner as the original. However, HCC reserves the right to require an original consent.
- I understand that I may inspect or copy the information used or disclosed.
  I understand that I am not legally obligated to provide this information and that I may revoke this consent at any time.
- I understand that the student records information listed above includes information which is classified as private on me under Minn. Stat. 13.32 and the Federal Family Education Rights and Privacy Act.

_____ _____
Student Signature Date

Please send information to: Records & Registration
Hibbing Community College
1515 East 25th Street
Hibbing, MN 55746
(218) 262-6735 1-800-224-4422 FAX: (218)263-2992
Attn: _____

This document may be available in alternative formats to individuals with disabilities by calling 218-262-7200 or 1-800-224-4422.

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