

## Office of Student Conduct & Civility Education Authorization to Release Student Information Form

l,	hereby give permission for the Office of Student	
Conduct & Civility Education a	nt Towson University to shar	e information with
	, my	regarding the
Name of person/entity sharing information	with Relation	n to student
incident on	, which resulted i	n interaction with the Office of
Date(s) of incident(s)		
Student Conduct & Civility Edu	ucation.	
The Office of Student Conduct	t & Civility Education is able	to share all information
pertaining to this situation inc	cluding, but not limited to: o	disciplinary charges, summary
of events, and any sanctions in	mposed.	
I understand that this authorize	zation is done solely at my r	equest and can be revoked or
removed from my file upon m	y request at any time.	
Student Signature	Date	Student ID #