



SAN DIEGO STATE
UNIVERSITY

Student Disability Services
Division of Student Affairs
San Diego State University
5500 Campanile Drive
San Diego CA 92182 · 4740
Tel: 619 · 594 · 6473
Fax: 619 · 594 · 4315
TTY: 619 · 594 · 2929

**AUTHORIZATION FOR RELEASE OF INFORMATION
FROM OUTSIDE AGENCY**

Name of Student: _____

RID#: _____ Date of Birth: _____

I hereby authorize the following individual/agency to release the records described below to Student Disability Services at San Diego State University:

Name of Individual: _____

Agency: _____

Street Address: _____

City, State and Zip: _____

Type of information to be released (please be specific): _____

Information should be sent to:

**Student Disability Services
San Diego State University
San Diego, CA 92182-4740
Attention: Nancy Goodknight**

Signature of Student

Date