



NORTHERN
Seminary

Authorization to Release Student Information to a Third Party

I, _____, Student ID # _____ request that the following person(s) be allowed to discuss my student account, registration status and grades with employees/representatives of Northern Baptist Theological Seminary:

1. Name: _____

Relationship: _____

2. Name: _____

Relationship: _____

3. Name: _____

Relationship: _____

*Please note that these persons will also need to correctly supply your address and ID number in order to discuss your student account.

Signed: _____ Date: _____

Notification placed on CAMS by _____