

The following form(s) can be filled in on-line, then printed for signatures and mailing or faxing.

To begin filling out the forms in Acrobat Reader, make sure the **hand**' tool is selected then click on a line or in a box and begin typing. Check boxes can be clicked on or off.



# Spokane Community College VETERAN STUDENT INFORMATION AUTHORIZATION

Date \_\_\_\_\_

Name \_\_\_\_\_

SCC student ID number  -  -

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**Current phone numbers:**

Home \_\_\_\_\_ Work \_\_\_\_\_

**I allow the Spokane Community College Veterans Affairs office to release information regarding my SCC enrollment to the following:**

- Department of Veterans Affairs, Veteran Agencies, Washington State Department of Vocational Rehabilitation, WorkSorce, Department of Social and Health Services, other institutions of higher education
- Parent(s) — (mainly for Ch 35 dependents)
- Spouse
- Other \_\_\_\_\_

Signature \_\_\_\_\_

**Information may be released to the following individuals (parent, spouse and/or other as per above):**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Current phone number \_\_\_\_\_ Relationship to student \_\_\_\_\_

**This signed form allows the following types of information to be released: home address; telephone; Social Security number; class schedule; time, date and location of class(es); faculty advisor; transcript: grades, credits, GPA, course descriptions; residency status; financial aid/veteran status, placement scores, disability status, holds/restrictions on records/debts to the college.**