

**Consent to Release Data – Request from an Individual**

**Explanation of Your Rights**

If you have a question about anything on this form, or would like more explanation, please talk to the Human Resources Coordinator before you sign it.

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I, \_\_\_\_\_, give my permission for ISD 508  
[*name of individual data subject*]

to release data about me to \_\_\_\_\_ as described on this form.  
[*name of other entity or person*]

**1.** The specific data I want ISD 508 to release \_\_\_\_\_.  
[*explanation of data*]

**2.** I understand that I have asked ISD 508 to release the data.

**3.** I understand that although the data are classified as private at ISD 508, the classification/treatment of the data at \_\_\_\_\_ depends on laws or  
[*name of other entity or person*]  
policies that apply to \_\_\_\_\_.  
[*name of other entity or person*]

This authorization to release expires \_\_\_\_\_.  
[*date/time of expiration*]

Individual data subject's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/guardian's signature [*if needed*] \_\_\_\_\_ Date \_\_\_\_\_