



UW

Office of the Registrar

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Laramie, WY 82071
(307) 766-5272
Fax: (307) 766-3960
registrar@uwyo.edu

ONE-TIME AUTHORIZATION TO RELEASE EDUCATIONAL RECORD INFORMATION

This form can be presented in person to the Office of the Registrar with appropriate ID (a valid driver's license, UW Student ID, or passport), or it may be submitted by mail, email or fax along with a legible copy of appropriate ID.

Release to:

Name: _____

Relationship to the student: _____

Organization or School: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Educational Records to be released: _____

Purpose of Release: _____

Requested by:

Student Name: _____ **W Number:** _____

Student Signature: _____ **Date:** _____

Registrar Staff Signature: _____

PHOTO ID PRESENTED:

Driver's License

WyoOne

Passport

UW OFFICE OF THE REGISTRAR USE ONLY

Processed by: _____ Date: _____

NOTE: _____