

**University of Baltimore School of law**  
**Office of the Law Registrar**  
**Student Authorization to Release Education Record Information**

|   |   |
|---|---|
| <b>Name</b>   | <b>EMPL ID#</b>   |
| <b>Email</b>  | <b>Date</b>   |
| <b>Date Needed</b>  | <b>Date of Birth</b>  |
| <b>Records Requested</b><br><input type="checkbox"/> Law School Application (including addendums)<br><input type="checkbox"/> Addendums to Application only<br><input type="checkbox"/> Other   | <b>Purpose</b><br><input type="checkbox"/> Bar Admission <input type="checkbox"/> Personal Use<br><input type="checkbox"/> Scholarship<br><input type="checkbox"/> Employment<br><input type="checkbox"/> Further Education |
| I understand that the Family Educational Rights and Privacy Act (FERPA) protects the confidentiality of my student records ("Education Records") and that University of Baltimore School of Law may only release these records to third parties with my prior written consent or as otherwise permitted by law. Intending to waive my right to confidentiality, I consent and direct University of Baltimore School of Law to release information from my Education Records to the following recipient (organization/person): |   |
| <b>Recipient Name</b>   | <b>Organization (if applicable)</b>   |
| <b>Recipient Email</b>  | <b>Recipient Phone</b>  |
| <b>How Documentation Should be Delivered (please provide email address or mailing address)</b><br><br>  |   |
| <b>PLEASE NOTE THE FOLLOWING:</b> <ul style="list-style-type: none"> <li>Certain offices may require the use of a specific release form other than this form.</li> <li>This form is specifically for requests made for records held with the University of Baltimore School of Law Registrar's Office for students that attended the School of Law.</li> <li>The Law School Registrar's Office requires a photo ID along with the completed form.</li> </ul>  |   |
| <i>By signing below, I hereby authorize University of Baltimore School of Law to release my Education Record as specified above. Further, I agree to release, indemnify, and hold harmless University of Baltimore School of Law, its employees, officers, and agents, from all liability for damages of whatever kind which may result on account of the University's compliance, or any attempts to comply, with this authorization.</i>  |   |
| <b>Student Signature</b>  | <b>Date</b>   |
| <b>OFFICE USE ONLY</b>  |   |
| <b>Staff Name/Initials</b> _____<br><b>Proof of Identity Received:</b> _____<br><b>Document Released:</b> _____<br><b>Date Released:</b> _____  |   |

Please return completed form and photo ID to [lawregoffice@ubalt.edu](mailto:lawregoffice@ubalt.edu).