

<b>CHICAGO STATE UNIVERSITY</b> <b>Master of Social Work Program</b> <b>Student Consent to Release Information related to Field Education</b>
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The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of student educational records. This form is to be used by students to grant permission to the Chicago State University, Department of Social Work, to release to field instructors information gathered from the "Application for Student Field Placement", the field application interview and orientation process. The information gathered from the application, field application interview and orientation relates to student interests and background and is used as part of the field placement process.

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Student's Last Name (Print)	First Name	Middle
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Student's University Identification Number (UID)

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Permanent Mailing Address	City	State	Zip Code
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**To grant permission:** I the undersigned, hereby authorize Chicago State University, Master of Social Work Program permission to release information gathered from the "Application for Student Field Placement" form and the field application interview and orientation process to Chicago State University Field Instructors and/or those responsible for coordinating field placements at the receiving school or agency and Faculty Field Liaisons.

This information is being released to assist in the process of field placement.

I understand that this waiver will remain in effect for as long as I am enrolled in the Master of Social work program at Chicago State University, unless revoked by me in writing and delivered to the Chicago State University Department of Social Work, however such revocation shall not affect disclosures previously made in connection with the application, field application interview, and orientation process by Chicago State University, Department of Social Work prior to the receipt of any such written revocations.

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Student Signature	Date
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