

# Information Release Consents

## Quick Steps

1. Click the “Information Release Consents” link under the “My Accommodations” heading.
2. Step 1: Select the type of person to whom you wish to give information release consent.
3. Step 2: Complete the Information Release Consent Form.
  - a. Consent Expires On: Auto-populates to 4 years from the current date.
  - b. Full name: required
  - c. Address, Phone, Fax, Additional Notes: These fields are not required but can be helpful to confirm identity and any details you would like us to know about this person.
4. Electronically sign the Release Statement and click the “Submit Information Release Consent Form” button to confirm the release consent.

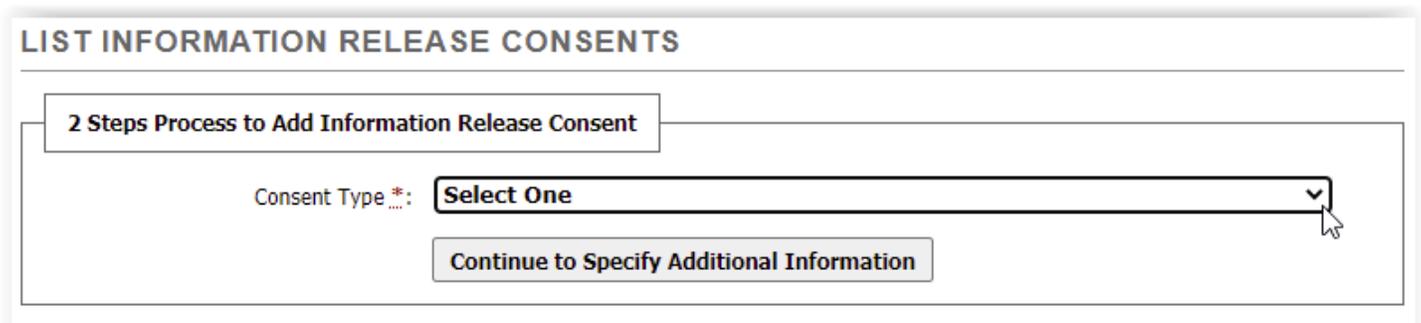
## Information Release Consents

To give one or more persons permission to discuss your accommodations with SAS, you must complete an Information Release Consent (**even if you have previously signed a parental request form with SAS**).

Click the “**Information Release Consents**” link under the “**My Accommodations**” menu header to view all existing and to add new release consents.

There are two steps to this process:

**Step 1:** Select the type of person to whom you wish to give information release consent.



**LIST INFORMATION RELEASE CONSENTS**

**2 Steps Process to Add Information Release Consent**

Consent Type \*:

**Step 2:** Complete the Information Release Consent Form

The Information Release Consent Form allows you to provide the following information:

- Expiration date (automatically set for 4 years for family members)
- Full Name (required)
- Address
- Phone
- Fax
- Additional Notes

## Information Release Consent Form

Consent Type: **Family Member**

Consent Description: SAS takes privacy very seriously and can share information with family members if given explicit approval by the student.

Please let us know who you would like your information shared with by filling out the form below. Make sure to include the name and contact information of the individual you would like us to be able to discuss your SAS file with.

This approval can be removed at any time.

Consent Expires On \*:  

Hint: Enter date in the following format Month/Day/Year (i.e. 12/31/2010).

Full Name \*:

Address:

Phone:

Hint: Enter 10-digit number only.

Fax:

Hint: Enter 10-digit number only.

Additional Notes:

Below the form you must indicate that you have read and agree to the Information Release Statement. When you have completed and reviewed the required information, click the **“Submit Information Release Consent Form”** button to continue.

The person you add will now be listed in the table on the Information Release Consent page.

## LIST INFORMATION RELEASE CONSENTS



SYSTEM UPDATE IS SUCCESSFUL

The system has successfully processed your request.

### 2 Steps Process to Add Information Release Consent

Consent Type \*: **Select One**

[Continue to Specify Additional Information](#)

Number of Records Found: **4**

Show Limit: **100** per Page [Update](#)

Showing Records: **1 - 4**

Consent Type	Full Name	Expiration Date	Status	Modify
Family Member	Winston Ober	07/20/2025	Active	<a href="#">Modify</a>

You may view and modify anyone you have given information release consent at any time using the “**Modify**” link in the table. To remove permissions, click the “**Modify**” link and set the status to “**In-Active**”.

All **active** Information Release Consent entries will be shown on your dashboard.



## INFORMATION RELEASE CONSENTS

- [Family Member](#)

Expiration Date: **07/20/2025**

Full Name: **Winston Ober**

Address:

953 Danby Road  
Ithaca NY 14850

Phone: **(607) 274 - 1005**

Notes:

Winston is hard of hearing and prefers communication in written format when possible.

- [Family Member](#)

- [Family Member](#)