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.
   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.

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
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.
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.

- **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.