



Duke
STUDENT CONDUCT *and*
COMMUNITY STANDARDS

Authorization to Release Information

Your request for information concerning your disciplinary record has been received. Please provide the following information listed below in order that we may assist you.

Name: _____
Dates of Attendance: _____
Unique ID: _____

I, _____ give the Office of Student Conduct and Community Standards at Duke University permission to release information concerning my disciplinary record to the following:

Myself

Institution(s) listed below: (Please include name, address, and preferred method of delivery (i.e. email, fax, or mail).

Other

Signature: _____

Date: _____