

Santa Barbara City College
Admissions & Records

CSN International Students Authorization Release

Student's Name (please print) _____
Last First Middle Initial

K _____ Phone _____ Previous Names (if any) _____

*I hereby authorize Santa Barbara City College to release the following information from my SBCC academic records to:

Please Print: Third party (individual, company, organization)

- Current enrollment information, Semester _____
- Past enrollment information, Semester(s) _____ Year _____
- Other (specify) _____

(please check) All CSN enrollment verifications Will Be emailed to the student's SBCC Pipeline Email only.

Office use only

ID Verified _____ Date _____

Signature *X* _____ Date _____

- Requests will be processed within **5-7 business days** and in the order in which they are received.
- Verifications will not be released until all financial obligations to the college have been cleared.
- Verification letters left in Admissions & Records for more than thirty (30) days will be discarded.
- Picture ID Required.** State and Federal regulations prohibit release of information without the student's written authorization.

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