

CONFIDENTIALITY WAIVER

l,	, hereby give permission for the Office of Academic
Integrity to discuss my current case (including relev	vant disciplinary history) with the following individuals:
Print Name	Relationship
Print Name	Relationship
Print Name	Relationship
Print Name	Relationship
I understand that such information is confidential, a	and a written waiver of confidentiality is required of me in order
for the issue to be discussed with the persons listed	d above. Accordingly, I hereby waive my right to confidentiality
in reference to the individuals listed above by signi	ng this document.
Print Name	Signature
Student ID number	Date