



**Consent & Authorization to Release Information**  
Walla Walla Community College, 500 Tausick Way, Walla Walla WA 99362  
Phone: 509-527-4262

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Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

I, \_\_\_\_\_, wish to have information regarding my disability accommodations shared between WWCC Disability Support Services (DSS) staff and specific individuals for the purpose of assisting them in understanding any or all of the following: request for accommodations, health and safety needs, strategies that are effective, academic success and academic transfer. I give my consent for this information to be shared verbally, in writing, or **by email** or fax between WWCC Disability Support Services (DSS) and the following persons and/or agencies:

**\_\_\_\_\_ (initials required) I understand that DSS will communicate with WWCC Employees involved with my education for the purposes of ensuring delivery of accommodations**

High School Counselor or Staff (Provide Name & Contact Number)

\_\_\_\_\_  
\_\_\_\_\_

Private Physician/Counselor, Therapist, Vocational Rehabilitation, other **College** or Institutions (provide Name & Contact Numbers). This is an open release to communicate with:

\_\_\_\_\_  
\_\_\_\_\_

Family Member (name & Contact Number)

\_\_\_\_\_  
\_\_\_\_\_

Other

\_\_\_\_\_  
\_\_\_\_\_

**This authorization may be revoked at any time and is to remain in effect for (1 year if left blank):**

One year     Length of WWCC Attendance     Until Revoked     Other \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**To those receiving information under this authorization:** The information disclosed to you is protected by state and federal law. You are not authorized to release it to any agency or person not listed on this form without specific written consent of the person to whom it pertains unless authorized by other laws. Walla Walla Community College is committed to provide equal opportunity and nondiscrimination for all educational and employment applicants as well as for its students and employed staff, without regard to race, color, creed, national origin, sex, sexual orientation, including gender expression/identity, marital status, age (over 40), the presence of any sensory, mental, or physical disability, the use of trained guide dog or service animal by a person with a disability, or status as a Vietnam and/or disabled veteran, National Guard member or reservist in accordance with the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, the Federal Rehabilitation of 1973, the Americans with Disabilities Act of 1990, and any other applicable Federal and Washington State laws against discrimination.