



NORTHWESTERN UNIVERSITY

CONSENT FOR RELEASE OF PERSONAL INFORMATION/EDUCATION RECORDS

I, the undersigned, understand that my consent is required, by the Family Education Rights and Privacy act of 1974, as amended ("FERPA"), for Northwestern University to release any personally identifiable information from my education records not defined as "Public Information" under the University's FERPA policy.

I, therefore, give my permission to **Prof. David Abrahamson** to release information related to my academic performance to prospective employers, academic institutions and/or prize juries for the purposes of placement, admissions and/or selection.

Print Name

Student ID or SSAN

Signature

Date

Please complete, sign and mail to Prof. David Abrahamson, Northwestern University, Medill School of Journalism, 1845 Sheridan Rd., Evanston, IL 60208.

This release is valid for one year from the above date.