



Disability Services Office

Laboratory Building
Telephone: (707) 654-1283
disabilityservices@csum.edu

Information Release Authorization

I, _____, _____
Student's Name Student's ID #

authorize _____
Name of hospital, clinic, school or agency

or its director, designee or records department to release the information contained in my records to the individual or organization listed below:

**Vineeta Dhillon, Director
Disability Services Office, Cal Maritime
200 Maritime Academy Drive
Vallejo, CA 94590**

**Telephone: 707-654-1283
Fax: 707-654-1159
E-mail: vdhillon@csum.edu**

Specific type of information disclosed:

- Psychological, vocational interest and aptitude test
- Medical records of treatment for physical and/or emotional illness including treatment records for substance abuse

For the purpose of:

- Establishing eligibility for academic accommodations
- Other (please specify): _____

Signature

Date