



22600 OH-34, Archbold, Ohio 43502
(419) 267-5511

Release of Information

Date: _____

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home phone number: _____

Parent(s) name(s): _____

Parent(s) address: _____

School attended: _____ 2021-2022 grade level: _____

I hereby authorize the release of information about _____

This information may be used by Northwest State Community College for internal and external communications and/or with media (newspapers, television, radio, etc.). I release Northwest State Community College from any responsibility in this manner.

(Indicate each situation for which permission is given.)

___ Still photographs

___ My name

___ Videotape film

___ Likeness

___ Motion picture film

___ Statements regarding my activities

___ Other

I also authorize use of such film, recordings or transcriptions of conversations, without restrictions as to time for:

___ Commercial/noncommercial educational publications

___ Educational/commercial television and radio

___ Northwest State Community College publications, advertising and Web site

Signature: _____ Date _____