

## **Release of Information**

Mount Angel Seminary Saint Benedict, Oregon 97373

It is the policy at Mount Angel Seminary that all information regarding students is held in the strictest confidence by those with approved access. Release of this information is permitted as allowed by law, Seminary policy, and this signed form.

I, the undersigned, hereby grant the release of pertinent information which is or will be part of my student files at Mount Angel Seminary to Seminary officials, other Ecclesiastical Authorities, or other persons or institutions with the need to know, as determined by the Seminary.

Except as allowed by law and Seminary policy, information from my files may not be released to any other party without my written consent.

Applicant's Name—Please Print

Applicant's Signature

Date

Sign and mail to: Admissions Office Mount Angel Seminary 1 Abbey Drive Saint Benedict, OR 97373