





RELEASE OF INFORMATION STATEMENT

I give my permission to the University of Louisiana at Monroe MAT Program to release information to the following school districts:

---

---

---

---

---

OR:

\_\_\_\_\_ Any school district interested in employing me.

This release can include information from my Application, Cover Letter, Resume and Program Plan.

This release is for a period of up to three years, or up to one year from the date of my last enrollment.

This release is for professional purposes only and is confidential in nature.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature