



Dual Enrollment or Early Admission Authorization To Release Educational Information to A Third Party

_____	_____
Student's Legal Name	UIN
<p>I authorize Florida Gulf Coast University to release my academic information to my high school, school board district, and parents while attending FGCU as a Dual Enrolled or Early Admission student. I understand this permission form only applies while attending FGCU under the status of Dual or Early admissions.</p>	
_____	_____
Student Signature	Date

High School: _____

Address: _____

Counselor: _____

Parents: _____