



103 Parker Hall
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Rolla, MO 65409-0930
Phone: (573) 341-4181
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Authorization to Release Information

Missouri University of Science and Technology
Office of the Registrar

I, _____, (*printed name*)
hereby authorize the Missouri University of Science and Technology to release information
connected to my progress as a student. I understand and agree that this may include:

- My major field
- My cumulative GPA
- My individual course grades
- My anticipated and/or actual graduation date
- My awards and/or organization participation
- My final transcript
- Any general comments on my contributions to the University

I understand this information will be released to the Department of Defense to be used
exclusively for the following purpose:

Utilization of Tuition Assistance at Missouri S&T

Signature _____ Date _____

Student ID _____

This form should be returned to:

Registrar's Office
Missouri University of Science and Technology
103 Parker Hall, 300 W. 13th Street
Rolla, MO 65409

Fax: (573) 341-4362
Email: registrar@mst.edu