## **CONSENT TO RELEASE**

## **EDUCATIONAL RECORD INFORMATION**

I, the undersigned hereby authorize the Saudi Arabian Cultural Mission to the U.S.A. to obtain any information contained in my child's educational records from any educational institution that he/she is attending or has attended.

Please print your name in English and do not use a pencil

NAME: \_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_