

## Permission to Release Grades

Complete this information to permit the Office of Correspondence Studies to release your grades by phone or e-mail upon request.

PLEASE PRINT LEGIBLY

Name.....

I am enrolled in .....

Please release grades to myself and the following person(s) listed.

.....

**Signature/Date**.....

By phone       To my e-mail

Please Send a Catalog to.....

**Place this form in an envelope and mail to**

Texas State University-San Marcos  
Office of Correspondence Studies  
601 University Drive  
San Marcos TX 78666