



Education for your future. Sisterhood for life.

Kameka McMillian, M.S.  
Office of Disability Services  
900 East Washington St.  
Merner Hall First Floor  
Greensboro, NC 27401  
336.517.1501

**WAIVER OF CONFIDENTIALITY FORM**

Under Federal law, you have the right to confidentiality with regards to your accommodation plan, records, and information with the Office of Disability Services (ODS) at Bennett College. Without prior consent from the student our office cannot release any information or engage in any conversations about your records with our department.

Students over 18 years of age have the right to waive their confidentiality rights in order to speak with third parties (i.e. parents, doctors, professors, etc.). Signing this waiver is voluntary and any questions you have may be asked and discussed in detail prior to you signing.

**\*If you agree to waive your confidentiality rights, please complete and sign the statement below\***

I agree to allow the Office of Disability Services at Bennett College to release information and discuss \_\_\_\_\_ (student's name) case with \_\_\_\_\_  
(third party's name) from \_\_\_\_\_ (starting date) to \_\_\_\_\_ (ending date).

**\*Below please provide the name, address, and phone number of the individual(s) who can have access to your records with the Office of Disability Services\***

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_