

McKay School of Education
Education Advisement Center
Release of Information: For Institutional Verification

(Please fill in form & then print)

First Name	Middle Name	Last Name	
Maiden Name	Student BYU ID # (9 digits)	Phone #	
Street Address	City	State	Zip
Email			
Major	Minor	Graduation Date	

How would you like to receive the Institutional Verification (check one):

I will pick up my Institutional Verification form (A picture ID must be provided at time of pick-up.)

Someone else will pick up my Institutional Verification form (A picture ID must be provided at time of pick-up.)

Name of person picking up form: _____

Please fax my Institutional Verification form to the following:

Name of Person or Institution: _____

Fax number: _____

Please mail my Institutional Verification form to the following:

Name of person mail is being sent to: _____

Street Address _____ City _____ State _____ Zip _____

Please email my Institutional Verification form to the following:

Email address: _____

Please complete information on the link provided by the following State Department of Education (DOE):

DOE Name: _____

I authorize Brigham Young University to release any and all information as requested on this Institutional Verification form.

Signature*

Date

*If submitting as a .pdf: I acknowledge and agree that by typing my name in the space provided constitutes the same as a written signature.

Please mail, fax, hand deliver or scan and email to:

**Education Advisement Center
Brigham Young University
350 David O. McKay Building
Provo, UT 84602**

**Phone: (801) 422-3426
Fax: (801) 422-0195
educationadvisement@byu.edu**

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