

STUDENT CONSENT FOR RELEASE OF STUDENT INFORMATION (Buckley Waiver)

I hereby authorize the UCSD Political Science Department to return my graded final examination/research paper by placing it in a location accessible to all students in the course. I understand that the return of my examination/research paper as described above may result in disclosure of personally identifiable information, that is not public information as defined in UCSD PPM 160-2, and I hereby consent to the disclosure of such information.

Quarter: _____ Course: _____ Date: _____

Instructor: _____

Student ID#: _____

Print Name: _____

Signature: _____