



NATIONAL AMERICAN UNIVERSITY

Authorization to Transmit Information Electronically

Transmission of data digitally and/or electronically allows National American University to communicate in a more efficient and timely manner with students (and others authorized by the student).

Name: _____ Campus: _____

NAU Student ID or Last Four Digits of SSN# _____ Address: _____

City: _____ State: _____ Zip Code: _____

EMAIL ADDRESS: _____

By signing below, I am authorizing National American University to communicate information electronically and/or digitally with me at the e-mail address shown above, or any other e-mail address I have on file at NAU.

SIGNATURE: _____ **Date:** _____

National American University complies with federal and state privacy laws and regulations. Those who may gain access to information that has been submitted electronically are staff and faculty at the university who need to gain access, and outside organizations and government bodies, in limited circumstances, as authorized by state and federal law. No one else may review your information without your prior written consent, a duly authorized subpoena or court order.

If you want the university to give information to some other person or entity (such as a parent, spouse, other relative, or friend), you must complete the following section of this authorization. If you give some other person or entity access to your records, that person or entity may be able to assist us with processing your information in a timely manner.

I give National American University permission to communicate through digital and/or electronic means

With _____ at _____ (email address).

I give National American University permission to communicate through digital and/or electronic means

With _____ at _____ (email address).

STUDENT'S SIGNATURE for the above permissions: _____ **Date:** _____

This authorization will remain in effect until terminated by you through submittal of a written request to withdraw this consent to the address provided below.

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This form must be printed and signed. For your convenience, you may either mail the original signed form to **Student Accounts, National American University, 5301 S. Highway 16, Suite 200, Rapid City, SD 57701** or fax the signed form to **605-721-5240**. If a fax is submitted, it is agreed that your faxed signature will have the same force and effect as your original signature.