



University
of Windsor

Authorization to Release Official Documents And Information

Date: _____

Student Name (printed) _____

Student ID: _____

I, _____, authorize the release of official documents including academic transcripts, program, contact information or any other information deemed necessary in the administration of the partnership program between the University of Windsor, and the Politecnico di Torino which includes FCA Canada, FCA US, and FCA Italy. These documents will be released for use in the student placement process and exchange program.

I also authorize the University of Windsor to share my name, program and contact information with any person and media that may contact the University of Windsor and the Politecnico di Torino.

Signature: _____

Date: _____