According to the mandate by the State of Minnesota College and University System, all participating Study Abroad and Travel students **must** be informed that their academic and discipline records will be reviewed by the International Programs Office.

- Please check this box stating that you have been informed of this mandate and authorize disclosure.

  Printed Name: ______________________________________________

  Tech ID Number: ______________________________________________

  Study Abroad/Travel Study Location: ______________________________

  Signed: ______________________________________________

  Dated: ______________________________________________

If you do not return this form with the box checked, your participation in the Study Abroad or Travel Study programs will be cancelled at your expense.

Thank you for your cooperation.

International Programs

Maxwell 105

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