

Student Accountability & Restorative Practices

Dean Certification Request Form

I hereby waive my privacy rights, including, but not limited to any rights pursuant to the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g, and grant my consent to authorize the William & Mary Student Accountability & Restorative Practices Office and the Registrar's Office to release my student academic, judicial, and/or honor information. I understand this request may take up to 10 business days to process. Requests cannot be made over the phone, nor can they be processed without a student signature. Postage will be paid by student if physical mail required.

Full Name (Please print)	Date
Student ID#	Graduation Date
Phone numbers (Home and Cell)	 Email
Please legibly write information for each box and	indicate how you would like it delivered.
Name of School/Institution/Agency, Address, Fax,	, and Email Check the method for delive
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