Access to Records Waiver

I,, hereby give my consent to the
(Print Full Name Please)
Presidential Student Ambassador Advisor, Associate Dean of Admissions, Shelbie Hugle to
review my Bluegrass Community and Technical College records to verify that I am enrolled and
meet the academic requirements. I understand that this information will be kept confidential.
Signature:
Student ID#:
Date:
Please include this form with your application packet and submit the complete packet to:
The Office of Admissions
Cooper Campus
119 Oswald Building
470 Cooper Drive, Lexington, KY 40506

Due by: Friday, July 18, 2014