

Employee Consent to Release: Home Address & Home Phone Numbers

I authorize the release of the following information to be published in our unit/department/college faculty/staff directory:

Home Address: _____ _____ _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Home Phone Number: _____	<input type="checkbox"/>	<input type="checkbox"/>	
Home Email: _____	<input type="checkbox"/>	<input type="checkbox"/>	
Home Fax: _____	<input type="checkbox"/>	<input type="checkbox"/>	
Pager: _____	<input type="checkbox"/>	<input type="checkbox"/>	
Name: _____			
Department: _____		Office ext: _____	

I agree that I will not use the information obtained from the directory for the purpose of personal gain, solicitation or share with other parties.

Signature: _____

Date: _____