



Spanish For All Austin, L.L.C.

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Phone: (512) 909-7466

Confidentiality of Student Information

I, _____ a student at Spanish For All Austin, L.L.C a student age 18 years or older, consent to the release of personally identifiable information from my education records to International Medical Interpreter Association Auditor Program.

I understand that the records to be disclosed include my social security number and other personally identifiable information from my education records. I acknowledge that the purpose of the disclosure is to assist the State Department of Education in obtaining and reporting information concerning the placement and retention of students in employment as required by section 212 of the Adult Education and Family Literacy Act. I understand that the personally identifiable information will be disclosed by Spanish For All Austin, L.L.C only to Department of Labor / Unemployment Insurance Agency. This information may not be redisclosed to others and will be destroyed as soon as all statistical analysis has been performed, or when the information is no longer needed, whichever date comes first.

Signature of Student

Date