

Permission to Discuss Form
Student Accessibility Services (SAS)

This form is for accommodation-related communication only and does not replace university FERPA release forms.

Student Name: _____ **Z-Number:** _____

Phone: _____ **FAU Email:** _____

Purpose of This Form

Student Accessibility Services (SAS) recognizes that students are the primary point of contact regarding their accommodations and services. By default, SAS communicates only with the student. If a student would like SAS to be able to answer questions or discuss information with specific individuals (such as parents, caregivers, clinicians, other FAU departments, etc.), the student may grant permission through this form.

Please note: Completion of this form allows SAS to share and discuss information related to the student's accommodations and involvement with our office with the individuals listed below. This permission **does not** allow the listed individual(s) to:

- Act on the student's behalf
- Request changes to the student's accommodations
- Receive copies of the student's disability documentation
- Meet with SAS staff without the student being present

The student may revoke this permission at any time by contacting SAS in writing.

Individuals Authorized for Discussion

Name	Relationship to Student	Contact (phone/email)	Purpose of Discussion (optional)

Student Consent and Acknowledgment:

Student Signature: _____ **Date:** _____