

How to fill out the Release of Information form

The following fields are required for client verification:

- Client Name
- Date of Birth
- Michigan Tech “M” #

The next section informs us how you want your information shared. If you need us to send information to a recipient (including yourself), mark “Disclose to.” If we will need two-way communication with a recipient, mark “Exchange with.”. Next, fill out the Name and contact information for the recipient (e.g., counselor name, “MTU Dean of Students”).

The next section informs us which information you would like released. If you would like your counseling records released, please mark the “Progress/Activity Note” option. If you need medication management records included, please mark the “Medical Log/History” option. If we will be writing a letter or providing a summary of services, please select the “Letters” and “Assessment Summary” options. If we will need to exchange verbal information with a recipient, please mark the “Verbal Information” option. If you have any questions on what to select, please email counseling@mtu.edu.

Next, please provide a response to “The purpose of such disclosure is.” If you are requesting records to be sent to a new provider who you will continue counseling with, write “Continuation of care.” If we are providing documentation to support your needs (e.g., academic accommodations, excused absences), write “Coordination of services.”

Finally, sign and date on the appropriate lines.

Please reach out to counseling@mtu.edu if you need any clarification on filling out this form.

Thank you,

Center for Student Mental Health and Well-being Team