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CONSENT FOR THE RELEASE OF HEALTH INFORMATION

INSTRUCTIONS: The patient must complete this form in its entirety in order for any health information to be released **from** the University Health Center. The released health information is for use by the named recipient only. This is according to the Family Education Rights and Privacy Act of 1974 which is a federal law that protects the privacy of student education records. **This information cannot be given to any other individual or agency without the patient's consent.**

Released health information will be mailed or can be picked up in person. Labs or partial records can be faxed to another healthcare provider. All requests for the complete medical record will be mailed. The immunization record is the ONLY information that may be emailed via a non-secure email to the requesting party. The Health Center email is not a secure email. As such, any immunizations sent via email could be at risk for exposing health information.

Student Name: ______________________________________ Student ID#_____________________

Current Address: ____

Telephone #: _______________________________________ Birthdate:______________________

I authorize the JMU Health Center to release the following health information:
CHECK ALL THAT APPLY
_____ Immunizations, including immunization records from other providers
Please send immunization record via: ☐ Email (not secure) ☐ Fax ☐ Mail
_____ Lab results ______________ (Date/s if any)
_____Complete medical record, including record from other providers ($10 charge)
_____Other/Relating to specific diagnosis or visit date, please specify ____________________________

I authorize UHC to release my health information to____
(Name of individual or agency)

____
(Address)

_____________________ _____________________ _____________________
(Telephone) (Fax) (Email)

_______________________ ____
(Date) (Patient signature)

Processed By:_________________________ Date:____________________ Pages:_____________ Faxed:____________

Mailed:______________ Pick-up:________ Emailed:____________

Updated 01/25