



PERMISSION FOR RELEASE OF INFORMATION

In compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Student Health Clinic of the University of Central Arkansas requires your written consent before disclosing any personal information. Your consent to share this information may be withdrawn in writing at any time, so long as such documents are specific as to information covered, dated, and signed.

I, _____, ID# _____, request
(Print Name) (DOB, Student ID#, or SSN)

Please choose one:

[] University of Central Arkansas Student Health Clinic, or

[] _____, Fax# _____
Name of Institution/Business

Release the following information from my health record: (Check all that apply)

- [] Immunization Record [] Lab Results [] Women’s Health Record [] Entire Medical Record
[] Care delivered on specific date ___ / ___ / ___ [] Care delivered for _____ only.
(Specific illness/injury)

Please release requested information to:

[] Student Health Clinic
University of Central Arkansas
Student Health Building – 1st Floor
201 Donaghey Avenue
Conway, Arkansas 72035-0001
Ph#: (501) 450-3136
Fax#: (501) 450-3370
E-mail: shc@uca.edu

OR: _____
Name

Address

City/State/Zip

Telephone Number

Please check return delivery method:

- [] Mail to above address
[] Fax to _____
[] E-mail to _____
(Note: Emails may not be protected by the HIPAA privacy rule)

Patient’s Signature Date

Contact Info (used only for questions regarding above request)

Witness By (SHC Staff)

All information in this communication, including attachments, is strictly confidential and intended solely for delivery to and authorized use by the addressee(s) identified above, and may contain privileged, confidential and/or proprietary information entitled to protection and/or exempt from disclosure under applicable law. If you are not the intended recipient, please take notice that any use, distribution or copying of this communication, and/or action taken or omitted to be taken in reliance upon it, is unauthorized and may be unlawful. If you have received this communication in error, please notify the sender and delete this communication from your computer.