



EXHIBIT A

STUDENT CONSENT FOR RELEASE OF INFORMATION

I understand that if I am admitted and enroll at Sacramento State University, the federal Family Educational Rights and Privacy Act of 1972 (FERPA) protects the privacy of my education records. As a prospective student, I also may have rights under the laws of the United States, the State of California and/or my country of residence protecting the privacy of records I give to Sacramento State and/or third parties in connection with my application to enroll as a Sacramento State student.

By signing this form, I, Mandeep Singh, hereby **waive** any rights described above and **give my consent** to Sacramento State and the person at Apply board, Inc. named below to disclose my application and any other education records to each other for the purpose of discussing my application to, admission status and educational experience at Sacramento State:

Name of Person: Massi Basiri
Name of Agency: ApplyBoard, Inc.
Address: 101 Frederick Street, Unit 600
Kitchener, ON, N2H 6R3
Phone Number: 519-900-6001
Email Address: applications@applyboard.com

I understand that I have the right **not** to consent to the release of information in my student records and that I may revoke this consent at any time by giving written notice to Sacramento State and the person from Agency named above. This consent remains valid unless and until I revoke it.

Prospective Student Signature: Mandeep Singh
Prospective Student Name (print): Mandeep Singh
Date: 06-02-2024

If Prospective Student is under 18 years of age:

I am the parent or legal guardian of the Prospective Student. I am signing this document on his or her behalf.

Parent or Guardian Signature: _____
Parent or Guardian Name (print): _____
Date: _____