



**University of Brighton**

**CONSENT TO DISCLOSE  
INFORMATION TO A THIRD PARTY**

Name *(please print)*: \_\_\_\_\_  
*(known by at University of Brighton)*

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

I, \_\_\_\_\_ hereby authorise the University of Brighton to  
disclose information concerning my final degree classification/ transcript of marks/ other  
*(please delete as appropriate... only data described here will be disclosed)*.....  
to: \_\_\_\_\_  
\_\_\_\_\_

**For verification purposes, please complete the following information:**

Date of birth \_\_\_\_\_

Year that studies were completed \_\_\_\_\_

Title of Programme studied or award held  
*e.g. BSc Geography, MA Creative Writing* \_\_\_\_\_

Student number *(if known)* \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

*I understand that this information will only be released to the authorised third party named above, and my consent is conditional upon the University complying with its duties and obligations under the Data Protection Act 2018 (UK)*