Letter of Authorization

To whom It May Concern:
I,
(English and Chinese full name of students), Social Security No. of Passport No, Student ID No. or Birthday, hereby waive my rights under the Rights of Privacy
Act and authorize the release of all information relevant to my academic record at
(the name and full address of your former school). I authorize Tamkang University to check my admission requirements as well as to ask if my qualification was gained as a result of a distance learning or Internet course or as a result of study at an associated college or validated course in the U.S.A. or overseas.
Yours faithfully,
(signature)
(date)