



Web Profile Consent Form for Students

I, _____, hereby grant Angelo State University
(Student Name)
permission to use my personal directory information and photo on the Angelo State
University Department of Student Life website.
(Department Name)

I understand that I must contact my department's web content provider(s) or the IT
Service Center if I want the information changed or removed at any time.

Student Signature: _____ Date: _____

Web Content Provider Signature: _____