

INDIVIDUAL CONSENT AUTHORIZATION FORM

I, _____, the undersigned, hereby authorize Rocky Mountain Relocation Council (RMRC) and its representatives, successors, and assigned, to use my name, photo, and written essay (or portions thereof) about my relocation (that accompanied my RMRC 2019 scholarship application) for publication.

I represent and warrant that the attached statement represents my true opinion. I further represent that I am of legal age and have every right to grant this authorization.

Print Name

Signature _

Date

IF UNDER AGE 18 AT THE TIME OF APPLICATION DEADLINE (APRIL 1, 2019)

I represent that I, _____, am a parent/legal guardian of, (applicant's name):

As the parent/legal guardian, I have the right to grant the authorization set forth above.

Print Name

Signature _

Date

Please include this consent form with the Completed Scholarship Application