(ISC)² Member Release Form

In consideration of the non-profit organization International Information System Security Certification Consortium, Inc's (hereinafter "(ISC)²") review of my examination results and membership status, I hereby voluntarily consent to and authorize (ISC)², or its authorized agents bearing this release or copy thereof, to release my examination results and membership status to

(Employer, University, or other third-party; hereinafter "Recipient") for purposes of verifying my examination results and membership status. I agree that this information may include any of the following:

- First and Last Name
- E-mail Address
- Date of Exam
- Certification Exam Taken
- Examination Results (passed or failed result) not examination score
- Membership Status

I authorize $(ISC)^2$, or its authorized agents, to disclose such information to Recipient. I hereby release $(ISC)^2$, its authorized agents, and all persons and organizations providing information from all claims and liabilities of any nature regarding this request.

I also understand that this information may become a part of my member file with (ISC)², regardless of the outcome of this request and/or my final status as an applicant. Notwithstanding this, (ISC)² will release information collected pursuant to this request only with Recipient, for the express purposes described above, or as required by law, by any governmental or regulatory authority, or by a court or other authority of competent jurisdiction.

FOR MEMBERS LOCATED OUTSIDE OF THE UNITED STATES: I consent to the transfer of the data described above to Recipient solely for the purposes described above. I acknowledge that (ISC)² is based in the United States, and such data will be transferred from the United States to the country where Recipient is located for processing.

Member Name	Date
Member Signature	(ISC) ² ID Number
Recipient Information	
Recipient Name	
Recipient Point of Contact:	
Recipient Address	
Recipient Phone Number	
Recipient Email Address	