

Social Security Number Disclosure and Consent

You are requested to provide voluntarily your Social Security Number to assist OUS (and organizations conducting studies for or on behalf of OUS) in developing, validating, or administering predictive tests and assessments; administering student aid programs; improving instruction; internal identification of students; collection of student debts; or comparing student educational experiences with subsequent workforce experiences. When conducting studies, OUS will disclose your Social Security Number only in a manner that does not permit personal identification of you by individuals other than representatives of OUS (or the organization conducting the study for OUS) and only if the information is destroyed when no longer needed for the purposes for which the study was conducted. By providing your Social Security Number, you are consenting to the uses identified above. This request is made pursuant to ORS 351.070 and 351.085. Provision of your Social Security Number and consent to its use are not required and, if you choose not to do so, you will not be denied any right, benefit, or privilege provided by law. You may revoke your consent for the use of your Social Security Number at any time by writing to the Registrar at Southern Oregon University, 1250 Siskiyou Blvd, Ashland, OR 97520.