

EXHIBIT WC.4

UNIVERSITY OF SOUTH FLORIDA  
RELEASE OF MEDICAL INFORMATION REGARDING  
A WORKERS' COMPENSATION INJURY

In order to facilitate the early return-to-work of injured employees and to simplify the Workers' Compensation (WC) claim process, it is sometimes necessary for USF to obtain medical information from treating physicians regarding the injured employee's ability to perform his/her essential job duties. It is usually in the case of long-term Workers' Compensation cases that this information becomes important in the attempt to bring the injured employee back to work as soon as possible. In an effort to simplify this process, we ask that you sign the statement below authorizing the University of South Florida to request and obtain this medical information from your physician, should it become necessary.

Thank you for your cooperation, and please feel free to call a WC Case Manager at 974-5720 if you have any questions or concerns about this, or any other aspect of your Workers' Compensation claim.

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I authorize the University of South Florida to obtain medical and pertinent information from my physician regarding my Workers' Compensation injury and my ability to perform essential job duties.

Name

Signature

Date Signed

Date of Accident