

## **Student Information Release Authorization**

In compliance with the federal Family Educational Rights and Privacy Act of 1974 on Access to and Release of Student Education Records, the University/Community College are prohibited from providing certain information from your student records to a third party, such as information on grades, billing, tuition and fees assessments, financial aid (including scholarships, grants, work-study, or loan amounts) and other student record information. This restriction applies, but is not limited, to your parents, your spouse, or a sponsor.

You may, at your discretion, grant the University/Community College permission to release information about your student records to a third party by submitting a completed Student Information Release Authorization. You must complete a separate form for each third party to whom you grant access to information on your student records. The specified information will be made available only if requested by the authorized third party. The University/Community College does not automatically send information to a third party.

Submit your completed form to the Office of the Registrar. Please note that your authorization to release information has *no expiration date*; however, you may revoke your authorization at any time by sending a written request to the Office of the Registrar at the address above. **NOTE:** For the third party designee you name on this form this release overrides all FERPA directory suppression information you may have set up on your student record. *However, it is University/Community College policy not to release certain aspects of student records e.g., registration, grades, GPA over the phone or via email.* 

## This information release authorization is intended for use only by the offices listed below:

- Business Office (University and Community College)
- Financial Aid
- Office of the Registrar
- Student Services

A. Student Information

NAME (LAST, FIRST, MIDDLE INITIAL)	SSN (LAST 4 DIGITS)	_ STUDENT ID NUMBER
CURRENT ADDRESS (STREET/PO, APT, CITY, STATE & ZIP)		
DAYTIME PHONE	_	
B. Third-party Designee		
NAME (LAST, FIRST, MIDDLE INITIAL)		SSN (LAST 4 DIGITS)
CURRENT ADDRESS (STREET/PO, APT, CITY, STATE & ZIP)		
DAYTIME PHONE	_	
RELATIONSHIP TO STUDENT		
INFORMATION TYPES ALLOWED (CHECK ONE OR MORE OF THE BOXES BELOW TO GRANT AUTHORIZATION  Grades/GPA, demographic, registration, student ID number, academic progress state, and/or enrollment information		
$\square$ Billing statements, charges, credits, payments, past due amounts, and/or collection activity		
$\Box$ Financial aid awards, application data, disbursements, eligibility, and/or financial aid satisfactory academic progress status		
<ul> <li>Institutionally-maintained loan disbursements, billing and repayment history history, balances, and/or collection activity</li> </ul>	(including credit reporting	ng history), communication
$\square$ Access to student records maintained by the Office of the Registrar and the B	usiness Office, including a	all of the above
$\square$ Access to student records maintained by the Office of Student Services, including records of disciplinary actions.		

C. Certification

STUDENT'S SIGNATURE