STUDENT CONSENT FOR RELEASE OF INFORMATION

Student Name (Please Print)  

Student ID#  

The Family Educational Rights and Privacy Act (FERPA) of 1974, as amended, seeks to guarantee both a student’s right of access to education records and the confidentiality of student information. Institutions may not disclose information contained in education records without the student’s written consent except under certain conditions. A student’s record may be released to parents, guardians or other third parties by providing a written authorization or consent.

STUDENT CONSENT FOR RELEASE OF INFORMATION

I hereby give my consent for my parents, guardian or other third party, as named below, to have access to my education records. I understand that each individual will need to show a valid photo ID at the time of release to view my records.

____________________________________
Student’s Signature
____________________________________
Date

☐ One time only. This box must be checked if you wish this to cover a one-time only release.

Parent/Guardian/Third Party (Please Print)

1) ______________________________________
   Name
   __________________________
   Relationship

2) ______________________________________
   Name
   __________________________
   Relationship

3) ______________________________________
   Name
   __________________________
   Relationship

STUDENT WITHDRAWAL OF CONSENT FOR RELEASE OF INFORMATION

I hereby withdraw my consent for my parent, guardian or other third party as named above, to have access to my education records, effective immediately. If I wish to reinstate the consent for release of information, I understand that I will have to complete another form at that time.

____________________________________
Student’s Signature
____________________________________
Date