

## FERPA RELEASE FORM

I hereby authorize \_\_\_\_\_

please specify office(s), department(s), and/or school

to disclose, make accessible, and furnish the selected information:

- Official Transcript
- Financial Aid Record(s)
- Disciplinary Record(s)
- Student Account Information
- Dean's Office file(s)
- Residential Programs file(s)
- Other (please describe): \_\_\_\_\_
- All of my records

To:	
Relation to student:	
Telephone number:	
E-mail address:	
For the purpose of:	
This release, unless revoked by me in writing, shall be effective until:	

Name \_\_\_\_\_ UNI \_\_\_\_\_

Signature \_\_\_\_\_ E-Mail \_\_\_\_\_

Date \_\_\_\_\_ Tel No. \_\_\_\_\_