

## **Authorization for Release of Student Records**

In accordance with the Family Educational Rights and Privacy Act (FERPA), Student Services may only release student records directly to the student, unless prior written authorization is given by the student. By filling out this form you give permission for others to view and have access to your student records. By default, your records will not be released to anyone else until this form is properly filled out.

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Student Information		
Last Name	First Name	Student ID or last 4 digits of SSN
Email	Phone	Date of Birth
Street Address	City	State
Indicate which records to be released		
<ul> <li>□ All Academic Records (records include: transcripts, admissions and registration information, class schedules, grades, assessment test scores, academic progress status, residency information, and any other documentation contained in the academic records)</li> <li>□ All Student Account Records (records include: amounts due for tuition and fees, sources of payment for tuition and fees, refund information, records hold information as it relates to parking tickets, library fines, financial aid repayments and any other information contained in student account records)</li> <li>□ All Financial Aid Records (records include: status of file, award and disbursement of funds information, satisfactory academic progress status, income information, and any other information contained in the financial aid application or file)</li> </ul>		
Other (Please specify)		
The following individuals are authorized t	o access the information s	specified above.
Please PRINT full name(s):		
Spouse:	Parent 1:	
Agency:	Parent 2:	
Other (Name & Relationship)		
Other (Name & Relationship)		
Student Signature		
I understand that although I am not required to release this information, I am giving my consent to Evergreen Valley College to disclose these records.  Student Initial		
This authorization shall stay in effect for the current academic year only or until such time as I revoke it, if earlier.  Student Initial		
Student Signature		Date
Office Use Only		

Government issued photo ID verified \_\_\_\_\_