**Westminster College**

**Federal Educational Rights and Privacy Act (FERPA)**

**Release of Information Authorization Form**

*In accordance with the Family Education Rights and Privacy Act of 1974 (FERPA, or the Buckley Amendment), which requires that colleges and universities protect the privacy of student records, it is Westminster College’s policy NOT to release non-directory information to anyone other than the student, unless the student has given us express written permission to do so. Please note that this limitation includes parents and guardians. If you would like anyone other than yourself to have access to your information, please complete this form.*

□ Do not release my information to anyone

**I consent to the release of my education record:**

Westminster College FERPA Authorization Form In accordance with the Family Education Rights and Privacy Act of 1974 (FERPA, or the Buckley Amendment), which requires that colleges and universities protect the privacy of student records, it is Westminster College’s policy NOT to release non-directory information to anyone other than the student, unless the student has given us express written permission to do so. Please note that this limitation includes parents and guardians. If you would like anyone other than yourself to have access to your information, please complete this form.  I consent to the release of my education records.

**Student Information**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

  Last First Middle Initial

Student ID Number: ­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authorization** (check all that apply)

I consent to the release of my education records to my parent(s) or guardian(s) listed below for the purpose of keeping them informed about my education at Westminster College. I understand that education records include, but are not limited to, information about my academic standing, disciplinary issues, and financial obligations to the College.

\_\_\_\_ **Academic records:** to include grades and other non-directory information

\_\_\_\_ **Financial Aid:** to include application, awards, student and parent loans and other information

\_\_\_\_ **Student Account Information:** to include all fines, fees, refunds, or balances due

\_\_\_\_ **Disciplinary Action Information**

\_\_\_\_ **Housing Information**

**Release of Information**

List names of persons authorized to have access to my education records: **(All information must be provided)**

Full Name Relationship to student Primary Phone Number

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Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_