

FERPA AUTHORIZATION TO RELEASE INFORMATION FROM STUDENT EDUCATION RECORDS

Last Name _____ First Name _____ Student ID Number _____

The Family Educational Rights and Privacy Act (FERPA) is designed to protect the privacy of a student's educational records. These records may include academic, financial aid, scholarship, athletics, veterans, and billing/account information. Records will not be released without prior written consent from the student. Certain information, defined as directory information, may be released without the prior consent of the student. **All sections must be completed for release to be valid - except Running Start students.**

Please select all applicable Information to be Released

Duration of this Authorization

Running Start Students: Release of all Educational Records

Until Date _____

Complete access to all records with no exceptions

Until I graduate or am no longer enrolled/leave

Academic Records Only

Until I revoke this FERPA Authorization

Financial Aid, grants or scholarships records

Student financial records

Attendance records

Revoke Prior FERPA Authorization

For financial aid and student financial records ONLY: You are required to **create a code word that you only share with the individual you have designated.** The individual must know this code word in order to gain access.

Code Word:

Organization Or School (if applicable)	Organization or School (if applicable)
Name	Name
Phone Number	Phone Number
Relationship to Student	Relationship to Student

By signing this form, I authorize Wenatchee Valley College to release and disclose information from my educational records as specified for the period of time indicated. This release remains in effect as specified or until I revoke this authorization in writing to the Student Records Office.

Student Signature

Date

