

FERPA RELEASE

Student's Consent to Release of Education Records Disclosure Form

The purpose of the Family Educational Rights and Privacy Act of 1974 is to protect the privacy of individual students by placing restrictions on the disclosure of information contained in a student's university record(s). Absent specific exceptions, Arkansas Tech University-Ozark Campus must have a signed authorization from the student on file to honor a verbal or written request for information from a student's education records by anyone other than the student.

Student Name (Please Print): _____

Student T#: _____

By signing this form, I, the undersigned student, agree that university personnel may provide any of the following designated information from my education records at Arkansas Tech University. (Check all that apply):

- ☐ Grades
- ☐ Enrollment or attendance records
- ☐ Course Performance
- ☐ Other (specify): _____
- ☐ Disciplinary proceedings
- ☐ Tuition and Fees
- ☐ Class Schedules
- ☐ Financial Aid
- ☐ Academic Transcript

The name and address of the person to whom this information may be released is:

The purpose of this disclosure is:

I understand that (1) I have the right not to consent to the release of my education records; (2) I have the right to receive a copy of such records released upon request; (3) and that this consent shall remain valid until revoked by me, in writing, and delivered to Arkansas Tech University-Ozark Campus, but that any such revocation shall not affect disclosures previously made by Arkansas Tech University-Ozark Campus before the receipt of any such written revocation.

Student's Signature

Date

For Office Use Only:

Date Received: _____

Date Recorded: _____

Employee's Initials: _____

Return Completed Forms To:

ozarkregistrar@atu.edu