

FERPA RELEASE OF INFORMATION



The Family Educational Rights and Privacy Act of 1974 (FERPA) restricts the personal information that can be released by the College without the written consent of the student.

Please complete this release of information form and submit it to the Registrar's Office, Elston 212, 78 Washington Avenue, Schenectady, NY 12305. Consent will remain in effect for an academic year. Each year you wish to allow access to your records, you will need to complete a new FERPA release form.

Student Name (print clearly)	Date of Birth	Student ID
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Student Signature for Release of Information	Date of Signature
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I give permission to Schenectady County Community College to release the following information to the identified individual stated below:

- ___ Academic Records (Grades/Transcripts/Schedule)
- ___ Billing statements
- ___ Financial Aid information

Release the above information to:

Name: _____

Address: _____

Phone: _____ **Relationship to Student:** _____

If the above person requests information concerning your records, that person will need to mention that you have a signed release form on file in the Registrar's Office and show appropriate identification. If making a telephone inquiry, he/she must provide your student ID number and FERPA password.

For this purpose, my FERPA password is :

Office Use Only:
Start Date: _____
Expiration: Aug 20 _____

NOTE: If form is not completed in front of a staff member in the Registrar's Office, Admissions, or Student Business Office the signature of the student must be notarized.

STATE OF NEW YORK, COUNTY OF

On the _____ day of _____ in the year _____ before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

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c: Admissions
 Financial Aid
 Student Business Office
 _____ Scanned

Office Use Only:
 ID Verified
 By _____