

**AUTHORIZATION FOR ACCESS TO STUDENT EDUCATIONAL RECORDS
~ RELEASE FORM ~**

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. Except to the extent that FERPA authorizes disclosure without your consent, your education records will only be disclosed with your written consent. By signing below, you authorize Chadron State College to disclose information from your education records in accordance with this consent. This consent remains in effect until revoked by you.

RELEASE OF INFORMATION

I, _____
Name (Please print)

Date of Birth

Student NUID#

give permission for:

Name (Please print)

Relationship to student

Name (Please print)

Relationship to student

To receive the following information:

- Academic Information (grades/GPA, registration, student ID number, academic progress, enrollment status)
- Financial Aid Information (awards, application data, disbursements, eligibility, etc.)
- Loan Information (loan disbursement information, billing and repayment history, communication history, balances, collection activity)
- Student Account Information (billing statements, charges, credits, payments, past due amounts, collection activity)
- All records listed above
- Other (please specify): _____

I understand that I have the right to inspect any records released pursuant to this consent and that I can revoke this consent at any time by delivering a written revocation to the office of the Vice President for Enrollment Management/Marketing at the address below. I understand my revocation is not effective as to records that have already been released in reliance on this consent.

Signature of Student

Date

<i>To be completed by the Office of Student Affairs</i>	
Release of Information placed on PeopleSoft by:	
_____ Signature of CSC Official	_____ Date

**Please return to the office of the Vice President for Enrollment Management/Marketing,
336 Crites Hall, Chadron State College.**