

# FERPA Student Authorization Release Form-Turtle Mountain Community College-Please return to Office of Admissions

I understand that under the provision of the Family Educational Rights and Privacy Act(FERPA) of 1974, as amended my records at the Turtle Mountain Community College will not be released to a third party without my approval. I hereby give permission to authorize personnel at the Turtle Mountain Community College to release records upon request.

Academic Records (Picking up transcript or grades)

Name of Individual(s) to whom information may be released (Please Print)

Name(s): \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Name(s): \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

- Please honor requests for my records by those individuals/parties identified above

I acknowledge by my signature that I understand, although I am not required to release my records to these individuals(s), I am giving my consent to release the information. I understand that this release remains in effect until my academic degree is met or revoke this permission in writing prior to that date. I also understand that if I am under 18 years old, TMCC can disclose such information.

- Please revoke the FERPA student Authorization Release Form on file at TMCC (will revoke all access to third parties).
- Please add or remove the above to/from the FERPA Release form on file at TMCC

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

Social Security #: \_\_\_\_\_

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

Date : \_\_\_\_\_