

Effective: 11/13/2014

Supersedes: 09/28/2012

Review Date: 11/13/2017

Issuance Date: 11/13/2014

Issuing Office: [Office of the Registrar](#)

EXHIBIT C

Departments should provide an authorization form for students who wish to request release of information from their records to a third party. This form may be adapted to reflect the type of student information maintained by the department.

AUTHORIZATION FOR RELEASE OF STUDENT RECORDS TO THIRD PARTY

I, _____

(Student I.D. No.) _____

request that the following record be sent to:(Number of copies: _____)

Name: _____

Address: _____

OPTIONAL

I request that an additional copy of this record be sent to me:

Student: _____

Address: _____

A fee of 10 cents per page is charged for copies.

Record sent as requested:

Date: _____

By: _____

Record Custodian