



COLLEGE of ARTS AND SCIENCES

## STUDENT CONSENT TO RELEASE EDUCATIONAL RECORDS UNDER FERPA

**PLEASE PRINT**

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

Student ID #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

I, the undersigned, hereby authorize the Office of the Associate Dean for Student Success, Policy & Undergraduate Scholarship to release my educational records such as grades, course schedules, advising, and academic standing, to the following parents and/or guardians:

1. Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2. Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I understand that (1) I have the right not to consent to the release of my educational records, information and works; (2) I have the right to receive a copy of such records upon request; (3) and that this consent shall remain in effect until revoked by me, in writing and delivered to UNCW, but that any revocation shall not affect disclosures previously made by UNCW prior to the receipt of any such written revocation.

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

Confidentiality and Student Privacy: Using FERPA The Family Educational Rights and Privacy Act (FERPA) protects the disclosure of student information to individuals other than University officials with "need to know" and those to whom the student has given access. FERPA prohibits the CAS Associate Dean's Office from releasing information about a student's academic standing to parents/guardians without the permission of the student.