

CONSENT TO RELEASE EDUCATION RECORDS

The Family Educational Rights and Privacy Act (FERPA) of 1974 is designated to protect the privacy of educational records the rights to students concerning the privacy of, and access to, their education records. In compliance with FERPA, Roxbury Community College is prohibited from providing certain information from your student records to a third party (including parents, step-parents, spouse, sponsor etc.) such as information on grades, billing, tuition and fees assessment, Financial Aid (including, but not limited to, your grants, scholarships, and work study) and other student record information. This restriction applies, but is not limited, to your parents, spouse or sponsors. Students may choose to complete and submit this form to the Enrollment Center allowing the release of their education records to specified third parties. Please note that while this form authorizes Roxbury Community College to release education records to third parties, it does not obligate Roxbury Community College to do so. Roxbury Community College reserves the right to review and respond to requests for release of education records on a case-by-case basis.

FOR OFFICE USE ONLY

Date Received: _____

Entered By: _____

Photo ID Verified: _____

For additional information, visit the website of U.S. Department of Education at <http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

NAME OF STUDENT (LAST, FIRST, MIDDLE) **RCC STUDENT ID NUMBER**

SECTION A. - Education records to be released (check all that apply):

- All Records Listed Below**
- Academic Information** (Grades/GPA, registration, class schedule, courses taken, student ID number, academic progress, enrollment status, academic intervention, honors, transfer credits, academic & administrative holds, awards, degrees, residency status, and mailing address)
- Student Account Information** (Billing statement, charges, credits, payments, refunds past due amounts, collection activity, debt information, late fees, billing addresses, financial holds, payment plans, tuition & fee balances, and communication history)
- Financial Aid Information** (FAFSA Application data, eligibility, awards, disbursements, financial aid Satisfactory Academic Progress status, Grants, Scholarships, and Work study)
- Health Information** (Medical notes, physician's notes, nurse's notes, personal health information)
- Student Conduct Information** (Student misconduct incident reports, academic dishonesty reports, Hearings & hearing results)
- Parking & Campus Services** (including parking citations and photo identification)

SECTION B. - Password and Person(s) to whom access to your education records may be provided: Photo-identification is required

Password Provided by Student	PRINT (Name of individual to whom information can be released)
PRINT (Name of individual to whom information can be released)	PRINT (Name of individual to whom information can be released)
PRINT (Name of individual to whom information can be released)	PRINT (Name of individual to whom information can be released)

SECTION C - Certification: (This form must be delivered in-person and a photo-ID must be presented at the time)

I understand that (1) I have the right not to consent to the release of my education records, (2) I have the right to inspect any written records released pursuant to this Consent, and (3) this authorization will remain in effect unless I revoke such consent by filing a new one of these Consent forms with 'Revocation of Consent' section (section D below) completed, and the revocation is received and processed by the Enrollment Center at Roxbury Community College.

STUDENT'S SIGNATURE **TODAY'S DATE**

SECTION D. - Revocation of Consent

I hereby revoke the consent granted above for _____. (Not valid unless received by The Enrollment Center)

STUDENT'S SIGNATURE **TODAY'S DATE**