

Student Information Release Authorization

In compliance with the Federal Family Education Rights and Privacy Act of 1974 (FERPA), the College is prohibited from providing certain information from your student records to a third party, such as information on grades, billing, tuition and fees, assessments, financial aid (including scholarships, grants, work-study, or loan amounts), and other student record information. This restriction applies, but is not limited to, parents, a spouse, a caseworker, an agency representative, or a sponsor.

Students may grant the College permission to release information (other than directory information) about their records to a third party by completing a Student Information Release Authorization. Students must complete a separate form for each third party to whom they grant access to information on their student records. The specified information will be made available only if requested by the authorized third party. The College does not automatically send information to the third party.

Students must submit this completed form to the Enrollment Center at either campus. The authorization to release information has *no expiration date*, however, a student may revoke the authorization at any time by sending a written request to the Enrollment Center. This form allows third parties access to student record information from any Oakton Community College campus.

NOTE: For the third party designee named on this form, this release overrides all FERPA directory suppression information. **It is College policy not to release certain aspects of student records (e.g., registration, grades, GPA, financial aid awards), over the telephone or via e-mail.**

This information release policy is intended for use by Oakton's Divisions of Student and Academic Affairs.

SECTION A: Student Information

Please print legibly.

Name _____ Soc. Sec. No. (*last four digits only*) _____ Student ID No. (*if known*) _____
LAST FIRST M.I.

Address _____ Phone _____
STREET CITY STATE/ZIP CODE

SECTION B: Third Party Designee

Name _____ Soc. Sec. No. (*last four digits only*) _____ Phone _____
LAST FIRST M.I.

Address _____ E-mail _____
STREET CITY STATE/ZIP CODE

Relation to Student _____

Check one or more of the boxes below to grant authorization to different types of information and records.

- Admission application, letters of recommendation, receipt of ACT/SAT scores, high school transcripts, and placement test scores
- Billing statements, charges, credits, payments, past due amounts, and/or collection activity
- Grades/GPA, demographic, registration, academic status, attendance, and/or enrollment information
- Financial aid awards, application data, disbursements, eligibility, and/or financial aid satisfactory progress status
- Loan disbursements, billing, and repayment history (including credit reporting history)
- Student employment information
- Other: _____

SECTION C: Certification

I authorize the above third party, named in Section B, to access the above indicated student record and/or account information. This authorization does not permit the third party to make changes.

Applicant Signature _____ Date _____