FERPA Release Form

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) establishes certain rights for students regarding the privacy of their educational record. While parents/guardians/spouses/ and others may have an interest in the student's record, access to or release of the educational record is only by written student consent. In accordance with FERPA, it is Waldorf University's policy to withhold certain educational records unless the student provides consent to disclose information. The purpose of this form is to provide the consent to Waldorf University required by FERPA.

_____ _____
Last Name First Name Middle Initial Student ID

_____ (_____) _____
Mailing Address Telephone Number

_____ _____
City / State / Zip E-mail Address

I, the undersigned, hereby authorize Waldorf University to release / discuss the specified educational records and information:

_____ _____
Student Signature Date

This authorization is valid until cancelled. This student may cancel this release at any time by submitting another FERPA Release form to the Office of the Registrar.

AUTHORIZATION TO RELEASE EDUCATION INFORMATION

☐ **ALL RECORDS** ☐ **NO RECORDS (only to self)** ☐ **OPT-OUT (No Directory Info Shared)**

☐ **Accounting** – Includes tuition and fee balances, financial holds, mailing and billing address, payment plans, accounting statements, collection information and debt information.

☐ **Admissions** – Includes date of application, program selected, documents received, documents pending, date of admission, admission status, and conditions of admissions.

☐ **Registration** – Includes current enrollment, dates of enrollment activity, enrollment status, residency status, semesters attended and mailing address information.

☐ **Academic Records** – Includes courses taken, grades received, (C)GPA, academic progress, honors, transfer credit awards and degrees awarded.

☐ **Financial Aid** – Included all general financial aid information.

PLEASE PRINT CLEARLY (if address is different than above, please list address for individuals below)
(P = Parent; G = Guardian; S = Spouse; O = Other)

☐ Release to ☐ Cancel _____ Relationship: P G S O _____
Print Name Specifics

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Print Name Specifics

Waldorf University utilizes various forms of automated technology communication with students. For quality purposes, Waldorf may monitor and/or record these communications. By submitting the FERPA Release Form, students and/or their representatives are consenting to monitoring and/or recording of such communications to include, but not limited to, phone, email, and text messaging. You give Waldorf University consent to call, text and email you at the information above, including your wireless number if provided, regarding educational services. You may still choose to enroll in the university if you do not provide consent.