



CONSENT TO RELEASE STUDENT INFORMATION

The *Federal Education Rights and Privacy Act of 1974*, commonly known as FERPA, is a federal law that protects the privacy of student education records. Students have specific, protected rights regarding the release of such records and FERPA requires that institutions adhere to these guidelines.

A student's written consent is required before the institution can disclose non-directory information. Non-directory information may include social security numbers; student identification numbers; race, ethnicity, and/or nationality; gender; transcripts; and grade reports. Students must personally submit the form to the Admissions and Records Office (C201) or email the completed document from their student Volmail account to admissions@jalc.edu.

Student Information:

Student's Name: _____ Date of Request: ____/____/____
Student ID# or SSN: _____ Date of Birth: ____/____/____ Phone: _____-_____-_____
Address: _____ City: _____ State/Zip: _____

Type of record to be released:

Academic Information (grades, transcripts, attendance, GPA, course schedule, progress, placement test scores)
Financial Aid Information (awards, application data, disbursements, eligibility, financial aid academic progress, appeal information)
Student Account Information (billing statements, payments, past due charges, credits, collection activity)
All records listed above

Person or agency authorized to access student records:

Person Name: _____ Agency Name (if applicable): _____
Relationship to student: _____ Phone: _____-_____-_____
Address: _____ City: _____ State/Zip: _____

Duration of release:

Continuous Access: Access will be granted indefinitely unless a written revocation of consent is received by Admissions and Records

Limited Access: Access expires on _____

I authorize John A. Logan College, under the guidelines of the Family Educational Rights and Privacy Act of 1974 (FERPA), to release or discuss the educational records specified above to the individuals or agency also above. This authorization does not permit the above party to make changes.

Student Signature: _____ Date: _____

Staff Witness: _____ Date: _____