Release of Information Form

In compliance with the Family Educational Rights and Privacy Act (FERPA), the policy of WSCC is to refuse to grant third party access to student records without the written consent of the individual student. Any consent given must include the specific records to be released or reviewed and the names of the individuals to whom the information may be released. If you wish to grant permission for your records to be reviewed, please complete the form below.

Student Name: ____________________________ Student # ________

I request the following records to be released:

___ All of my student records

___ Academic Records
  (Including transcripts; grade appeals; academic status; advising; admissions office files, etc.)

___ Financial Aid Records
  (Including all financial aid applications, awards and files, balances, fines, and business office files, etc.)

___ Disciplinary Records
  (Including any disciplinary event or hearing, or other disciplinary action or response)

___ Other (Specify) _____________________________________________________________

To whom may the student files be released?

Name: ____________________________ Relationship: ____________________________

____________________________________  ____________________________

____________________________________  ____________________________

____________________________________  ____________________________

Student Signature: _______________________________________________________

Note: There will be a service fee for producing photocopies of any records that are requested to be copied by the student or by the person to whom the student gives permission to request photocopies.