

FERPA Student Authorization for Release of Educational Records



The Family Educational Rights and Privacy Act (FERPA) protects the privacy of Pima Community College (PCC) students' educational records and generally limits the release of student information without the student's express written consent, regardless of the student's age. The purpose of this release form is to facilitate the communication of specified student information to authorized individuals identified by the student (recipient).

Please note:

1. While this form authorizes PCC to release a student's information, it does not require PCC to do so. PCC may decline to release information if PCC, in its sole discretion, determines the release would not be in the student's best educational interests.
2. Only the information specified on this form may be released, and only to the designated recipient in the specified manner.
3. A signed release only authorizes the disclosure of information to the recipient; it does not authorize the recipient to make any changes to the student's enrollment, financial aid status or any other decisions affecting the student's status with PCC.
4. A student may revoke this release at any time by informing the Office of Enrollment Services and Registrar in writing.

TO BE COMPLETED BY STUDENT

SECTION 1: Student Information

Student Name: _____ Student ID#: _____

Phone: _____ Email: _____

SECTION 2: Educational Records To Be Released (Check All That Apply)

- Personally Identifiable Information** (e.g., personal address/email/phone#, student ID#, SSN)
- Academic Information** (e.g., grades/GPA, class schedule, academic progress/probation/suspension, enrollment status)
- Financial Information** (e.g., scholarships, grants, financial-aid status, billing/payment history, balances)
- Disciplinary Information** (e.g., Student Code of Conduct/Title IX proceedings, disciplinary sanctions)
- Other** (please specify): _____

(For Access & Disability Resources (ADR) records, please use the ADR-FERPA form available from ADR or the Office of Enrollment Services and Registrar.)

SECTION 3: Recipient(s) To Whom Educational Records May Be Released

Recipient Name(s) (use additional pages if necessary): _____

Address(s): _____ Relationship to Student: _____

Phone: _____ Email: _____

SECTION 4: Scope/Purpose of Release (Check All That Apply; Use Additional Pages if Clarification is Necessary)

- PCC may release *documents* related to the specified educational records to the recipient.
- PCC may *discuss/verbally release* the specified education records with the recipient.
 - In-person
 - Over the phone (Please designate a **password** for recipient to provide when making telephone requests: _____)
 - Only when the student is present/party to the discussion
- Recipient may be present* during meetings between student and PCC officials at which educational records are discussed.
- PCC may release educational records to the recipient *only for the following purpose(s)*: _____

- PCC *may not release* the following type(s) of information to the recipient: _____

SECTION 5: Duration of Release – Not to Exceed One Year (Check One)

- One-Time Release For the Current Academic Semester This release expires on: _____

SECTION 6: Student's Certification

By signing below, I authorize the appropriate office/official at PCC to release my specified educational records to the Recipient subject to the terms specified in this document.

Student's Signature: _____ Date: _____

Submission Instructions

- **Scan and email** to registrar@pima.edu. Submissions sent from personal email (non-PCC email account) must include a notarized copy of government-issued ID card; or
- **Deliver in-person** to (must present a government-issued ID card) the Office of Enrollment Services and Registrar, 4905 E. Broadway Blvd., Suite B220; or
- **Mail** (must include notarized copy of government-issued ID card) to:
Pima Community College
Office of Enrollment Services and Registrar
4905B E. Broadway Blvd., Suite 220
Tucson, AZ 85709; or
- **Fax** (must include notarized copy of government-issued ID card) to: 520-206-4790

FOR OFFICIAL USE ONLY

Received By: _____ Dept./Office: _____ Date: _____