



STUDENT CONSENT FORM TO RELEASE EDUCATIONAL INFORMATION

Family Educational Rights and Privacy Act (FERPA) of 1974

Name of Student (Last, First, Middle):

Student ID:

The Family Educational Rights and Privacy Act (FERPA) affords certain rights to students concerning the privacy of, and access to, their education records. Students may choose to complete and submit this form to the Registrar allowing the release of their education records to specified third parties. Please note that FERPA provides that your records may be released without your consent under certain circumstances.

Instructions: Submit completed form to the Registrar Assistant or your admission's representative..

SECTION A. EDUCATION records to be released:

- ALL EDUCATION RECORDS - NO LIMITATIONS [or CHECK SPECIFIC RECORDS BELOW]
Academic Information (grades/GPA, registration, academic progress, class schedules.)
Financial Aid/Loan Information (awards, application data, disbursements, eligibility, academic progress status, billing/repayment history [including credit reporting history], balances, and collection activity.)
Disciplinary Records (conduct records related to Student Honor Code.)
Student Account Information (billing statements, charges, refunds, payments, past due amounts, collection activity.)
Other (please specify)

SECTION B. Duration of Release (check one):

- Limited Use: This authorization expires 1 year from date of form.
Recurring Use: This authorization will remain active until revoked.

SECTION C. PIN Access Code Creation:

Create a unique PIN (Personal Identification Number) for each of the designated individual(s) listed below. Provide this access code to those individuals and GMC staff will use this PIN code to verify their identity.

FOUR (4) DIGIT PIN ACCESS CODE: FOUR (4) DIGIT PIN ACCESS CODE:

SECTION D. Person(s) to whom access to education records may be provided:

Table with 2 columns: Name, Mailing Address, City, State, Zip Code, (Area Code) Telephone, Relationship to student.

I understand that (1) I have the right NOT to consent to the release of my EDUCATION records, {2} I have the right to inspect any written records released pursuant to this consent, and (3) I have the right to revoke this consent at any time by submitting a signed, written statement to the Registrar Assistant at my respective campus. By signing, Georgia Military College is hereby released from all legal responsibility or liability for the release of the above mentioned information.

Student's Signature (required)

Date