

STUDENT RECORDS RELEASE AUTHORIZATION

In accordance with the federal Family Educational Rights and Privacy Act of 1974 (FERPA), Gavilan College may only release student records directly to the student, unless prior written authorization is given by the student. By filling out this form, you give permission for others to view and have access to your student records. By default, your records will not be released to a third party (including parents, a spouse, or sponsor) or anyone else until this form is properly filled out. Also, this form is used to opt-out of your directory information being released. Student Information

Last Name:	First Name:	Gavilan Student ID: G00
Email:	Phone:	Date of Birth:
Street Address:	City:	State:

Indicate which records need to be released:

All Academic Records (records include: transcripts, admissions and registration information, class schedules, grades, assessment test scores, academic progress status, residency information, and any other documentation contained in the academic records).

All Student Account Records (records include: amounts due for tuition and fees, sources of payment for tuition and fees, refund information, records hold information as it relates to parking tickets, library fines, financial aid repayments and any other information contained in student account records).

All Financial Aid Records (records include: status of file, award and disbursement of funds information, satisfactory academic progress status, income information, and any other information contained in the financial aid application or file).

Other (Please specify)

The following individuals are authorized to access the information specified above:

Please PRINT full name(s):

Spouse:	Parent 1:
Agency:	Parent 2:
Other (Name & Relationship)	

Opt Out:

Do not disclose any Directory Information (Directory Information shall include: Student participation in officially recognized activities and sports including weight, height, and high school of graduation of athletic team members. Degrees and awards received by students, including honors, scholarship awards, athletic awards, Dean's and President's List recognition).

Student Signature:

I understand that although I am not required to release this information, I am giving my consent to Gavilan College to disclose these records. This authorization shall stay in effect for the current academic year only or until such time as I revoke it, if earlier.

Student Signature

Date