



## Student Consent to Disclose Education Records

(To be completed by the student)

The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of student education records created or maintained by a school that receives Federal funds. Students who attend The University of North Carolina at Greensboro (UNCG) retain the right of privacy in their education records. UNCG may provide access to a student's education records to a third party if the student provides written consent using this form or as provided in FERPA and UNCG policy available on-line at <http://studentconduct.uncg.edu/policy/ferpa.pdf>. A "qualified parent" may receive access upon student written consent or with a copy of the parent's most recent IRS 1040 if the parent claimed the student as a dependent.

I am/was a student at UNCG. I hereby give my voluntary consent for UNCG officials to disclose the following education records: [Specifically describe the records to be disclosed, e.g. "all records in \_\_\_ office," "conduct records," "transcripts," etc.]

\_\_\_\_\_

The disclosure of the records listed above may be made to \_\_\_\_\_ for the purpose of \_\_\_\_\_.

I intend for this consent to be effective until \_\_\_\_\_ (date). I understand I may revoke this consent in writing at any time.

I understand that FERPA provides me the right to receive copies of the records disclosed pursuant to this consent. I also understand that UNCG may charge me a reasonable fee for such copies.

\_\_\_\_ I do not wish to receive copies of the records that are disclosed pursuant to this consent.

\_\_\_\_ I wish to receive copies of the records that are disclosed pursuant to this consent. Please send records to me at the following address: \_\_\_\_\_

Name During Enrollment: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### NOTARIZATION REQUIRED

(If the student does not personally appear)

State of \_\_\_\_\_, County of \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public for said County and State, do hereby certify that \_\_\_\_\_ personally appeared before me this day and acknowledged the due execution of this instrument and, being duly sworn by me, made oath that the statements in the foregoing instrument are true. Witness my hand and official seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

OFFICIAL SEAL

\_\_\_\_\_  
Signature of Notary Public

My Commission Expires: \_\_\_\_\_

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### UNCG VERIFICATION OF STUDENT IDENTIFICATION REQUIRED

(If the student personally appears)

The above-named student personally appeared before me and I verified the student's picture identification.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_