



California State University, Stanislaus  
 Enrollment Services  
 One University Circle  
 Turlock, CA 95382  
 (209) 667-3264

## Consent for Release of Academic Records

University ID #: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last
First
Middle

It is the policy of California State University, Stanislaus, to honor all rights and to comply with all obligations arising under the Family Education Rights and Privacy Act (FERPA).

Students who are over the age of eighteen or attending a university are considered an “eligible student,” meaning the rights to their records have transferred from their parents to themselves.

The Federal Family Education Rights and Privacy Act (FERPA) prohibits the release of student information to anyone but the student without the student’s written permission to do so. This document will allow the staff of Enrollment Services to discuss specific aspects of your academic records with the person(s) you have designated below, such as a parent or spouse.

**Student Release:**

I, (student) \_\_\_\_\_, do hereby consent to have information in my records in the California State University, Stanislaus Enrollment Services discussed with the following person(s).

**Remember to provide the authorized person with your date of birth and student ID.**

Name: (Please Print)	Relationship:
_____	_____
_____	_____
_____	_____

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

**Please Note:** This release pertains to information in California State University, Stanislaus Enrollment Services only. It does not permit release of information authorization at any other office on campus.

This document will remain valid until such time that the student revokes in writing this release form.

**Please read “Authorization to Release Information” on back of form.**

# **Authorization to Release Information**

## **Why should I sign this release?**

Circumstances often arise where a student may want a parent, relative or another individual to have access to their academic records. Enrollment Services will accept a written authorization from a student consenting to the release of information from their academic records to an individual named by the student.

## **How do I implement the release?**

Bring the completed Release form to Enrollment Services during normal business hours. The release must be signed in the presence of an Enrollment Services counter staff person.

## **How will the release be used?**

Once the release has been received, the individual(s) listed may call or visit Enrollment Services to ask questions regarding your academic records. The individual must inform the counter staff member that a release form is on file. Prior to releasing any information, Enrollment Services will verify with the individual their name, the student's date of birth and campus identification or social security number.

## **May I rescind this release?**

To rescind this release, please send a written statement to Enrollment Services that includes your:

- Full name
- Date of birth
- University ID
- Statement to rescind the request (please include an effective date)
- Name of the individual who no longer will have access to your educational records
- Signature and date

## **What if I have additional questions?**

Staff is available to answer your questions during normal business hours. Enrollment Services is located in the Mary Stuart Rogers Building Room 120. You may contact us at (209) 667-3264