



Office of the Registrar
Authorization to Disclose Information

The Family Educational Rights and Privacy Act (FERPA) of 1974 is designed to protect the privacy of educational records, to establish the rights of students to inspect and review the educational record, and provide guidelines for the correction of inaccurate or misleading data through informal and formal hearings.

Student Information:

Print Name _____ Required: JC Student Number _____

*Disclosure Options: (Please check one box only)

Option 1: Full Disclosure
By choosing this option you are authorizing JC to release any and all information from your educational record to the individual(s) or organization(s) identified below.

Option 2: Partial Disclosure
By choosing this option you are authorizing JC to release only the information identified below from your educational record to the individual(s) or organization(s) identified below. If this option is selected and no information is specified below, the release is invalid and no information will be released.

Required:
Specify the information you want to release (for example: balance owed to JC, grades, grade in a specific class, etc.)

Authorized Individual(s) or Organization(s)

List the individual(s) or organization(s) you are authorizing JC to release information to:

Print Name Clearly _____ Print Name Clearly _____

Required: Four Digit Pin * _____

*Create your own four digit pin number (any four numbers). The authorized individuals must provide this number when requesting information.

Optional: Termination Date: _____

Student Authorization

I have read this document and fully understand the contents. This document authorizes JC to release information from my educational record, as specified above, to the individual(s) listed above and is effective upon submission.

Student Signature _____ Date _____

Office Use Only:

Date Received: _____ Received By: _____