

FERPA CONSENT TO RELEASE FORM

The Family Educational Rights and Privacy Act of 1974 (FERPA) allows a student's rights concerning the privacy of, and access to their educational record. As a student, you may choose to complete and submit this form which will allow the release of your financial aid records to third parties you specify. Please note that this form authorizes Life University to release your record, but it does not obligate Life University to release your record. Requests for the release of financial aid records will be reviewed and responded to on a case-by-case basis.

SECTION A: STUDENT ACKNOWLEDGEMENT

I, _____ (print name), hereby authorize Life University to release my financial aid record, which may include information such as student ID, admissions status, financial aid, grades (GPA), registration, academic progress, etc.

SECTION B: PERSON TO WHOM ACCESS IS GRANTED

Check appropriate box

- My Parents [name(s)] _____
- My Guardian [name(s)] _____
- My Spouse (name) _____
- Other (name/specify) _____

Please note: Those given access will be required to verify identity before information regarding your record is released

SECTION C: PURPOSE OF RELEASE

Check appropriate box

- Family Communication
- Employment Communication
- Another Academic Institution
- Other (Specify) _____

SECTION D: SECURITY QUESTION

Please provide a security question with an answer that is known by only you and the individual listed above.

Please note: Not required if releasing to another academic institution.

Question _____

Answer _____

SECTION E: STUDENT AUTHORIZATION

I acknowledge by signing this form, I authorize Life University to release my financial aid record to those indicated. I understand that I am not required to give those indicated access, but that I am consenting to do so. I understand that this release remains effective until I provide the Financial Aid Office at Life University with written notice withdrawing my consent to release.

Student's Name (Printed) _____

Student's Signature _____

Student ID# _____ Date _____