

CONSENT TO RELEASE CONFIDENTIAL INFORMATION

In accordance with Fayetteville State University's (FSU) Student Education Records Policy, a student may grant FSU the right to release confidential and specific information contained in or about educational records (such as grades, disciplinary actions, etc.) to third parties such as parent(s), guardians(s) and/or spouse by completing the attached Consent to Release Confidential Information form.

Disclosure of Educational Records

Fayetteville State University may, at FSU's discretion, disclose information from a student's education records to third parties with the written consent of the student. However, in certain circumstances described in FSU's disclosure policy, FSU may disclose records to third parties without the students consent. Students may view FSU's disclosure policy online at http://www.uncfsu.edu/documents/policy/students/Student_Education_Records-FERPA.pdf

Directory Information

Fayetteville State University recognizes the following as directory information: a student's name, local and permanent address, photograph, email address, telephone number, enrollment status, date and place of birth, major field of study, dates of attendance, honors, degrees and awards (including scholarships) received, participation in officially recognized activities, organizations and sports, weight and height of members of athletic teams, and the most recent previous educational agency or institution attended.

FSU may disclose any of those items without prior written consent until the student, during his or her enrollment, notifies FSU in writing to the contrary.

Directory information shall not include a student's social security number or student identification number.

For further information about this policy, please contact the Office of the Registrar.



Name of Student (Last, First, MI)

CONSENT TO RELEASE CONFIDENTIAL INFORMATION

Student ID:

Date

SECTION A. Education Records to be released (check all that apply)

ay provi	y Educational Rights and Privacy Act (FERPA) protects the privacy of student education records. FS' de access to a student's education records to a third party only as provided in FERPA and FSU policy udent provides written consent using this form. FSU's policy is available on-line at
	w.uncfsu.edu/documents/policy/students/Student_Education_Records-FERPA.pdf
parent r	nay also receive access with a copy of the parent's most recent IRS 1040 if the parent claimed the
ident as	a dependent, with a student's written consent, or as otherwise provided by FERPA or FSU policy.
	Academic Information
	Financial Aid Information
	Loan Information [including credit reporting history]
	Disciplinary and Student Affairs Records
	Student Account Information
	Medical or Psychological Records
	All records listed above
	Other (please specify):
SECT	ION B. Person to whom access to education records may be provided
	My parent(s) (specify name(s))
	My guardian (specify name)
	My spouse (specify name)
	Other (specify name)
SECT	ION C. Purpose of the release
	Family Communication
	Employment
	Admission to an educational institution
	Other (please specify)
SECT	ION D. Verification of Identity and Acknowledgement
I unde	rstand that in order to ensure my privacy is maintained, FSU will be verifying the identity of the
persor	to whom access to education records may be provided.
I also	understand that 1) I have privacy rights as outlined in FERPA and FSU policy and 2) this consent
form v	vill be effective until I submit a written revocation to the registrar.
Signa	ture Date