



**PERMISSION TO RELEASE INFORMATION
FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT**

In compliance with the Federal Family Educational Rights and Privacy Act of 1974 (FERPA) as amended, information about your student account may not be released to a third party (i.e. your parents, spouse, sponsor, etc.) without your written permission. To grant specific individual(s) access to your student account information, please complete this form.

I, _____, authorize the release of the following information to the
Print name (first/middle/last)
individual(s) indicated below. This permission is valid until _____ (e.g. anticipated
graduation date).
Month/day/year

	Release	Do not release
Academic records	<input type="checkbox"/>	<input type="checkbox"/>
Billing records	<input type="checkbox"/>	<input type="checkbox"/>
Financial Aid records	<input type="checkbox"/>	<input type="checkbox"/>
All records**	<input type="checkbox"/>	<input type="checkbox"/>

** NOTE: By checking this, you are including Academic, Billing, Financial Aid and Disciplinary Records.

Name of individual to be granted access

Relationship to student

4 digit PIN (to be used when calling to access records)

Name of individual to be granted access

Relationship to student

4 digit PIN (to be used when calling to access records)

(It is the student's responsibility to give the PIN to the parents, spouse, sponsor, etc.)

Student signature

Student ID number

Date

For additional reference please refer to <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

William Paterson University, Center for Student Services, Morrison Hall Room 101, Wayne, NJ 07470

Please check picture ID

Received _____

Processed _____