San Diego Community College District

CONSENT TO RELEASE STUDENT EDUCATIONAL RECORDS

The Family Educational Rights and Privacy Act of 1974 (FERPA) prohibits the disclosure of information contained in your educational records to a third party, unless you provide written consent. You must complete a separate form for each third party to whom you grant access.

Section A - Student Information	
Name (last, first, middle initial) - PRINT	CSID# Date of Birth
Home Address (street, apartment number, city, state, zip code)	Daytime Phone Number
Section B – Third Party Designee Information	
Name (last, first, middle initial) – PRINT	Relationship to Student
Home/Business Address (street, apartment number, city, state, zip code)	Daytime Phone Number

Section C – Student Certification

I, _____, give consent to the San Diego Community College District to release my educational records to the third party designee listed in section B above. The only type of information that is to be released under this consent is:

_____ transcript _____ enrollment verification _____ financial aid records
_____ contact instructor _____ degree verification for employment or admission to other schools
_____ all records
_____ other (specify) _____
_____

I acknowledge that this release to remain in effect (check one)

- ☐ from _____ to _____
- ☐ from _____ and until I submit a notification in writing revoking my authorization.

_____ _____
Student's signature Date

Photo identification will be required of any person requesting access to a student's records.

OFFICIAL USE ONLY: This area is to be used to make notes of items discussed/distributed.