



# FERPA RELEASE AUTHORIZATION FORM

**John Wood Community College**  
**Enrollment Services**  
1301 South 48th Street  
Quincy, IL 62305-8736

## WHAT IS FERPA

FERPA, the Family Educational Rights and Privacy Act of 1974, as Amended, protects the privacy of student educational records. It gives students the right to review their educational records, the right to request amendment to records they believe to be inaccurate, and the right to limit disclosure from those records. An institution's failure to comply with FERPA could result in the withdrawal of federal funds by the Department of Education.

## FERPA RELEASE AUTHORIZATION

To authorize the release of FERPA-protected information, the student must complete all items below and submit this form to the Office of Enrollment Services.

Student's Name (print) : \_\_\_\_\_ Phone/Cell: \_\_\_\_\_ J# or SSN: \_\_\_\_\_

### Information to Be Released (Please check)

- |  |  |
|--|--|
| <input type="checkbox"/> All Institutional Records | <input type="checkbox"/> Academic Progress & Status (including grades) |
|  | <input type="checkbox"/> Course Schedules                              |
|  | <input type="checkbox"/> Holds/Obligations                             |
|  | <input type="checkbox"/> Tuition Account                               |
|  | <input type="checkbox"/> Financial Aid Awards/All FA Documents         |
|  | <input type="checkbox"/> Other _____                                   |

### Release Information to the following:

Specific Internal JWCC Offices (i.e. public relations, Perkins, etc.): \_\_\_\_\_

### Individual/Organization:

Name	Address (street , city, st, zip)	Relationship
Name	Address (street , city, st, zip)	Relationship

The above information will be released with my full consent. I understand that this authorization remains in effect for one full academic year only. It will be necessary to send a written letter to revoke this authorization prior to the expiration date, if I choose to end it sooner.

**This form must be submitted by the student in person or submitted with a notary seal stating it is the student's official signature. This form can not be faxed or emailed.**

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

<b>Office Use:</b> <input type="checkbox"/> Financial Aid AY/Banner ____/____ <input type="checkbox"/> Records/Registration AY/Banner ____/____            JWCC Acceptance Initial _____
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