



LIVINGSTONE COLLEGE

**FERPA CONSENT FOR RELEASE OF STUDENT EDUCATION RECORD INFORMATION**

The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the confidential nature of students' educational records. Education records are defined as any record directly related to a student and maintained by Livingstone College (includes but is not limited to academic records, attendance records, disciplinary records, financial records, grades, and email communications about students). FERPA prohibits Livingstone College from disclosing personally identifiable information from student education records without the appropriate student consent, except in specific statutorily authorized circumstances.

Consistent with FERPA, the undersigned authorizes Livingstone College to disclose personally identifiable information from my education records to the following individual/entity specified below for the purpose identified below.

Printed Name/Entity: _____	Purpose of Disclosure: _____
Printed Name/Entity: _____	Purpose of Disclosure: _____
Printed Name/Entity: _____	Purpose of Disclosure: _____
Printed Name/Entity: _____	Purpose of Disclosure: _____
Printed Name/Entity: _____	Purpose of Disclosure: _____

I authorize Livingstone College to disclose the following personally identifiable information from my education records to the individual/entity listed above. (Select all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> ALL Education Records  | <input type="checkbox"/> Student Conduct Records ( <i>discipline records, incident reports, hearing transcripts, conduct recordings, investigation reports, determination letters, witness statements, etc.</i> ) |
| <input type="checkbox"/> Academic Records ( <i>transcript, grades/GPA, credit hours enrolled/earned, class schedule, academic progress, enrollment status, etc.</i> ) | <input type="checkbox"/> Student Accounts ( <i>billing statements, charges, credits, payments, past due accounts, collection activity, financial holds, etc.</i> )  |
| <input type="checkbox"/> Financial Aid Records ( <i>awards, application data, disbursements, eligibility, financial aid academic progress status, etc.</i> )          | <input type="checkbox"/> Other (please specify): _____  |
| <input type="checkbox"/> Student Housing Records  | _____   |

I authorize the selected disclosure for the following duration. (Select one).

- One-time disclosure
- Throughout the end of the then-current academic semester
- Throughout the end of the then-current academic year
- Unlimited – until student provides written revocation
- Through this specific date: \_\_\_\_\_

\_\_\_\_\_  
Student Name (printed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Date