

RECORD RELEASE FORM

You may release records covered by the Federal Family Educational Rights and Privacy Act of 1974 (FERPA) to a third party by completing this form and sending it to the Student Success Center at St. Thomas University.

This form must be completed before the university will release non-directory information to anyone including your parents, spouse, or sponsor. If you choose to revoke previously granted authorization, you must send a signed written request to the Student Success Center.

St. Thomas University does not release any information other than directory information by phone or email.

Student Information:

Printed Name: _____
Student ID#: _____ Social Security #: _____
Home Address: _____
Daytime Phone # _____

Third Party granted access to academic records:

Printed Name: _____
Relation: _____ Daytime Phone #: _____
Home Address: _____

Please check one/all of the boxes below to indicate the level of access to academic records.

- Access to all student account records maintained by the Business Office.
- Access to all financial records maintained by the Financial Aid Office.
- Access to all academic records maintained by the Registrar's Office.

Certification:

I authorize access to the indicated student record information by the above third party. This authorization does not permit the third party to make changes to the student records.

Student Signature: _____ Date: _____