

FERPA Release Form

PLEASE TYPE OR PRINT CLEARLY

STUDENT I.D. NUMBER _____ STUDENT LAST NAME _____ STUDENT FIRST NAME _____

UC San Diego Division of Extended Studies will not release information about your education record without your written consent.

To grant your parent, guardian, or another third party access to your UCSD Division of Extended Studies education records, you must complete, sign, and submit this form. **We will not disclose any information from your education record to individuals not identified in the authorization section below.** UCSD Division of Extended Studies assumes no liability for honoring your instructions.

To access your education record over the phone, you and the individuals you have identified below will need to provide your name, student identification number, and FERPA password. You must create a FERPA password below, which must be between 8 – 10 characters and cannot be your date of birth or any part of your student ID number or SSN.

FERPA PASSWORD

I authorize the following individual(s) to have access to my records:

LAST NAME		FIRST NAME	
RELATIONSHIP TO STUDENT		EMAIL	
The above named person is authorized to have informational access ONLY to: (check all that apply)			
<input type="checkbox"/> Billing information: Including statements, charges, credits, payments, refund status, past due amounts and collection activity			
<input type="checkbox"/> Financial Aid Information: Including awards, application data, disbursements and eligibility			
<input type="checkbox"/> Academic Records: Registration status, student ID, grades, and/or enrollment information			
The above named person (parents or legal guardians only) is able to make enrollment changes to my education record:			
<input type="checkbox"/> Enrollment Changes: including requests to add or drop a course, or change your grading option on your behalf			
LAST NAME		FIRST NAME	
RELATIONSHIP TO STUDENT		EMAIL	
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<input type="checkbox"/> Enrollment Changes: including requests to add or drop a course, or change your grading option on your behalf			

To authorize additional individuals, please attach a supplemental sheet with all information listed above.

I understand that only I can order transcripts. Permissions on this form do not give third parties access to request transcripts on my behalf.

I understand this information may be released verbally or in writing, depending on the situation. I have a right to inspect any written records released pursuant to this consent, and I may revoke this consent at any time by submitting a written request to do so. This form overrides all previous forms submitted.

For Office Use Only

Received by _____
Date _____

Questions? Contact Student Services

Phone ► (858) 534-3400
Number

Return a signed copy of this form to:

Mail ► Student Services
University of California San Diego
Extended Studies
ATTN: FERPA Release
9500 Gilman Drive, Dept. 0176-H
La Jolla, CA 92093-0176

Email ► unex-reg@ucsd.edu

Fax ► (858) 534-8527

What is FERPA?

FERPA grants you, the student, the right to privacy of and access to your official records maintained by UC San Diego Extended Studies. Under FERPA, your education records including grades, financial information, and notice of academic and disciplinary actions are confidential unless you grant permission to release information to others. UCSD Extended Studies will not release information about your education record without your written consent, except where FERPA allows for an exception.

REVOKE AUTHORIZATION:

At any point in the future, if you would like to revoke this or any other authorization, please contact Student Services at unex-reg@ucsd.edu.

STUDENT SIGNATURE *physical signature required* _____ DATE _____