

# MARION TECHNICAL COLLEGE

## AUTHORIZATION TO RELEASE FERPA PROTECTED INFORMATION

Federal law prohibits MTC from discussing information (other than directory information) with anyone other than the student, unless authorized in writing by the student.

This release is effective until the cancellation of release has been requested by the student.

### Section I – STUDENT INFORMATION

Student Name \_\_\_\_\_

PowerCampus ID Number \_\_\_\_\_ or SS # (last 4 digits) \_\_\_\_\_

### Section II – AUTHORIZATION INFORMATION (Please complete section I also)

I authorize only the person or persons listed below to receive information

I Name \_\_\_\_\_ Relationship \_\_\_\_\_ SS # (last 4 digits) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

II Name \_\_\_\_\_ Relationship \_\_\_\_\_ SS # (last 4 digits) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Release Password \_\_\_\_\_ (providing a password allows us to release non-directory information over the phone)

I authorize Marion Technical College to release the following information (Check all that apply)

- Academic Information: (including but not limited to) Grades, Enrollment Level, Course Selection, Attendance
  - Financial Aid Information: Satisfactory Academic Progress, Grade Point Average, FAFSA (Free Application for Federal Student Aid) Information, Award Amounts
  - Student Account Information: Account Balances, Account Charges, Billing Payments
- Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

### Section III – CANCELLATION OF RELEASE (Please complete section I also)

I request the person or persons' authorization listed below to be cancelled from (Check all that apply)

- Academic Information: (including but not limited to) Grades, Enrollment Level, Course Selection, Attendance
- Financial Aid Information: Satisfactory Academic Progress, Grade Point Average, FAFSA (Free Application for Federal Student Aid) Information, Award Amounts
- Student Account Information: Account Balances, Account Charges, Billing Payments

I Name \_\_\_\_\_ Relationship \_\_\_\_\_

II Name \_\_\_\_\_ Relationship \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

ID Verified by MTC employee (initials) \_\_\_\_\_

RETURN FORM TO THE OFFICE OF STUDENT RECORDS