STUDENT CONSENT TO RELEASE INFORMATION
Family Educational Rights and Privacy Act (FERPA) of 1974
20 USC § 1232g and 34 CFR § 99

Instructions to Student: Carefully read the information below. After completing the form, submit it to the University at Albany Undergraduate Education staff you are authorizing to release your information.

In accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974, the University at Albany must obtain written consent from a student before releasing the non-directory educational records of that student to a third party. Such written consent must be signed and dated by the student, specify the records to be released, state the purpose of the release, and identify the party or class of parties to whom the release may be made.

I, _______________________________________________________.
(Student’s Name-Print)

_____________________________________.
(Student ID #)

hereby give my written (notarized) consent to the University at Albany, State University of New York,
to release my ________________________________
(Specify records to be released)

for the purpose of ________________________________
(Specify purpose of the release)

to ________________________________
(Identify the party or class of parties to whom the release may be made)

I understand that my written consent will remain in effect until I notify the University at Albany faculty/staff/office named in this form, in writing (and notarized), to cancel it.

I understand that the specific information referenced in this form is being released to a third party at my request with the understanding that s/he will not release it to any other parties. The University at Albany is hereby released from all legal responsibility or liability pertaining to the release of the above-mentioned information.

Student’s Signature: _________________________________________ Date:_____________________

STATE OF NEW YORK )
COUNTY OF ) SS.:
On the _____ day of __________, 20___, before me personally came ________________________, to me known and known to me to be the person described in and who executed the foregoing instrument and he/she acknowledged to me that he/she executed the same.

________________________ Notary Public

University at Albany is required to keep the original signed consent form. Students are advised to keep a copy of this consent form for their records.

8-30-2017