



STUDENT CONSENT FOR ACCESS TO EDUCATION RECORDS
THE UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE
OFFICE OF THE REGISTRAR

Name of Student (Last, First, Middle Initial): Student ID: Date:

The Family Educational Rights and Privacy Act (FERPA) affords certain rights to students concerning the privacy of, and access to, their education records. Students may choose to complete and submit this form to the Registrar allowing the release of their education records to specified third parties.

ELECTION A. Education records to be released (check all that apply):

- Academic Information (grades/GPA, registration, student ID number, academic progress, enrollment status)
Financial Aid Information (awards, application data, disbursements, eligibility, financial aid academic progress status)
Loan Information (University-maintained loan disbursements, billing and repayment history [including credit reporting history], communication history, balances, collection activity)
Student Account Information (billing statements, charges, credits, payments, past due amounts, collection activity)
All Records Listed Above
Other (please specify):

SECTION B. Person(s) to whom access to education records may be provided:

Name(s) of person(s) to whom access to records may be provided (use additional pages if necessary)
Address(es) of person(s) to whom access to records may be provided Relationship to Student

SECTION C. Duration of release (check one):

- One-Time Use: This authorization can be used only once.
Limited Use: This authorization expires on:

SECTION D. Purpose of release (check one):

- Family Communications
Employment
Admission to an Educational Institution
Other (please specify):

I understand that (1) I have the right not to consent to the release of my education records, (2) I have the right to inspect any written records released pursuant to this Consent, and (3) I have the right to revoke this consent at any time by delivering a written revocation to the University Registrar.

Student's Signature (Date) Signature of Parent or Guardian (if under 18) (Date)

Instructions for completing this form:

- 1. The form must be fully completed and signed by the student. Records cannot be released if any Section of this form is not filled out entirely.
2. Completed forms should be submitted to the Office of the Registrar in Room 141 of the King Building, or mailed to Office of the Registrar, UNC Charlotte, King 141, 9201 University City Boulevard, Charlotte, NC, 28223; or faxed to the Office of the Registrar at (704) 687-1419. Questions about this form may be directed to the Office of the Registrar at (704) 687-5505.

This information is released subject to the confidentiality provisions of appropriate state and federal laws and regulations which prohibit any further disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by such regulations.