

Student Consent for Release of Education Record Information (FERPA form)



Office of Admissions / Registrar & Records
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Family Educational Rights and Privacy Act (FERPA)

What is FERPA? The Family Education Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student educational records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's educational records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level.

How may parents obtain education information? The quickest, easiest way for parents to receive information about their son's or daughter's grades, financial statement, or other student information is for the student to provide it. Students can access information online and provide a copy to their parents. Student records are available at the student self-service website – <http://prodokc.okstate.edu/>. Parents may also make a guest payment to the students Bursar account through this website. This form allows parents to obtain educational record information directly from university officials if the student consents to such access in a non-coercive environment.

Authorization for Release of Information

Understanding my privacy rights under FERPA, I consent to grant access to my educational records to the individual listed below as follows:

- This release allows the individuals below to discuss my educational records with University officials, or to schedule an appointment to view my educational records in person.
- This release permits the individual(s) below the ability to either view and/or make changes to my educational records, request official documents, or otherwise conduct educational business on my behalf (drop/add classes, order transcripts), only where I have given specific permission below by initialing my choice(s).
- University officials may discuss details of all educational records with the individuals listed below, including grades, class schedule, academic standing (probation, etc.), disciplinary records and bursar information. It excludes sharing information from police or University medical records.
- This release is in effect until I revoke it in writing.

Release To:

_____ full name-please print _____ last 4 digits of Social Security # _____ month/year of birth

_____ full name-please print _____ last 4 digits of Social Security # _____ month/year of birth

I consent to grant access to the above named the authorization to:

_____ VIEW my educational record information.
Initial (view grades, GPA, class schedules, etc.)

_____ make ACTION to my educational records.
Initial (add/drop classes, order transcripts, etc.)

Please return the completed form, **in person***, to the Office of Admissions or Registrar & Records, Student center, 1st floor

_____ Student Name _____ CWID

_____ Student Signature _____ Date

_____ Admissions/Records staff member _____ Date

Type of Photo ID presented: Driver's License Student ID Other _____

*If unable to deliver in person, the following section **must be completed by a Notary Public** and mailed to the address at the top of this form:

State of _____ County of _____

On this _____ day of _____, 20____, _____ personally appeared before me,

whose identity I proved on the basis of _____, to be the signed of the above instrument.

Notary Public: _____

My Commission Expires: _____

My Commission Number: _____