



FERPA CONSENT FOR THE DISCLOSURE OF EDUCATION RECORDS

Student Name: _____ Student's ID: @_____

I hereby authorize Northwestern Connecticut Community College and its employees to release the following: *(Please initial next to all that apply)*

- | | |
|--|--|
| <input type="checkbox"/> Tuition & Payment information | <input type="checkbox"/> Financial Aid information |
| <input type="checkbox"/> Disciplinary information | <input type="checkbox"/> Academic information |
| <input type="checkbox"/> Other _____ | |
- (Please list specific information to be released)*

to the following individual(s) and/or organization(s):

Name of individual(s) and/or organization(s)

Address of individual(s) and/or organization(s)

Disclosure is made for the following purpose(s): *(Please initial next to all that apply)*

- Payment of my tuition/fee bill
- Accessing and/or discussing my financial aid
- Supporting my academic progress
- Coordinating academic and/or support services
- Release of grades or academic history
- Other *(please specify)* _____

I acknowledge and authorize that photocopies and facsimiles of the original of this Consent for the Disclosure of Education Records, including my signature, shall be as valid as the original.

I understand that this authorization may be cancelled by me at any time by giving written notice to the Registrar's Office.

Signature of Student: _____ Date: _____

Witness/Staff Signature: _____ Date: _____

This document, when completed by the student, authorizes, but does not require, the College to disclose personally identifiable information pertaining to the student that is maintained in College records. The College reserves its right under federal law to decline to disclose such information, when in the exercise of the College's judgment, it determines it is appropriate not to disclose such information.