



Authorization to Disclose Student Record Information

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The Family Education Rights and Privacy Act generally prohibits KCU from disclosing personally identifiable information from a student's education record to a third party (regardless of the relationship) without the student's prior written authorization.

This form is intended to be used for students requesting a one-time release of information, such as an advisement meeting with a family member or a letter of recommendation. **This release is only pertinent to information shared for the instance detailed below and must be completed by the student. This is NOT a form that can be used to request an official or unofficial transcript.**

Students who want to grant the third party specified below access to information related to their student record after this instance must complete the FERPA Authorization request in Workday.

Student Information

Name Student ID:

Primary Program

Campus: ☐ Kansas City ☐ Joplin

Authorization to Disclose

I give my permission for (Department, Faculty, or Staff member's name) to include the following non-directory information selected below for the following purpose:

*If I am requesting a letter of recommendation/oral reference, I hereby my right to review this recommendation letter or know the contents of any oral communication.

**Other purpose not listed above:

I give my permission for the faculty or staff member named on this form to include the non-directory information selected below to all persons or entities listed here:

Name	Contact Information or Website for Application Upload

Check the box for all types of information you would like to share with the recipients designated above:

- | | |
|---|---|
| ☐ Student Account Information | ☐ Any information on the attached personal statement |
| ☐ Graduation Information | ☐ Any information on my KCU transcript including my grades and courses taken |
| ☐ Financial Aid Information | ☐ Any educational and other records to which the recommender has (or has had) access in making academic and/or employee evaluations and decisions (including but not limited to examinations, essays and so forth) |
| ☐ Any information on the attached curriculum vitae or resume | ☐ Other: <input type="text"/> |

By signing below, you authorize the KCU employee designated on this form to share education record details to the above named recipient. This release is for the one-time release of information to the recipient.

Student Signature Date

The following notice will be provided to the persons or entities identified above: The information disclosed to you is governed by the provisions of the Family Educational Rights and Privacy Act. 20 U.S.C. § 1232g. Therefore, the disclosed information may be used only for the purposes identified by the student and may not be redisclosed to others without the specific written authorization of the student.