The Family Education Rights and Privacy Act

Registrar's Office
Fax (910)642-1267
PO Box 151
Whiteville, NC 28472

| Last | First | MI |
| :--- | :--- | :--- |
| Mailing Address: |  |  |

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This authorization is valid until canceled. This student may cancel this release at any time by submitting another FERPA form to the Southeastern Community College Registrar.

I give permission for Southeastern Community College to release selected items below to the recipient listed for the purpose of $\qquad$ -.

Date
Student Signature

Student ID No. $\qquad$

Cell Phone No.: $\qquad$
Emai: $\qquad$

## AUTHORIZATION TO RELEASE EDUCATION INFORMATION

## ALL RECORDS

Accounting - Includes tuition and fee balances, financial holds, mailing and billing address, payment plans, accounting statements, collections information and debt information.


Admission - Includes date of application, program selected, documents received, documents pending, date of admission, admission status and conditions of admission.
Registration - Includes current enrollment, dates of enrollment activity, enrollment status, residency status, semesters attended and mailing address information.

Academic Records - Includes courses taken, grades received, GPA, academic progress, honors, transfer credit award and degrees awarded.
Financial Aid - Includes all general financial aid information.Discipline - Includes all student discipline related issues both academic and non-academic.

## PLEASE PRINT CLEARLY

( $\mathrm{P}=$ Parent, $\mathrm{G}=$ Guardian, $\mathrm{S}=$ Spouse, $\mathrm{O}=\mathrm{Other}$ )Release to

$\square$
Cancel $\qquad$ Relationship (circle one): P G S ORelease to $\quad \square$
Cancel $\qquad$ Relationship (circle one): P G S O


Cancel $\qquad$ Relationship (circle one): P G S ORelease to $\square$ Cancel $\qquad$ Relationship (circle one): $P$ G S O

## RECEIVED

| RECEIVED |
| :---: |
|  |
| Office Use Only |

