**Simpson College**

**Office of the Registrar**

Simpson College - 701 N. C Street, Indianola, IA 50125

Phone: 515-961-1517 Fax: 515-961-1310

**STUDENT INFORMATION RELEASE AUTHORIZATION**

The Family Educational Rights and Privacy Act (FERPA) affords certain rights to students concerning the privacy of, and access to, their education records, including grades, billing, tuition and fees assessments, and financial assistance. This restriction applies, but is not limited, to parents, spouses, or a sponsor. Students may choose to complete and submit this form to the Registrar allowing the release of their education records to specified third parties.

The specified information will be made available only if requested by the authorized third party. Simpson College does not automatically send information to a third party. Also, this release does not allow the third party to negotiate on behalf of the student. The student has the responsibility to make all decisions as they relate to all actions at the college (including, but not limited to, admissions, financial aid, registration, student life, and campus security). For the third party designee the student names on this form, this release overrides all FERPA directory suppression information that may have been set up on the student record**. As part of its privacy policy, Simpson College does not release certain aspects of student records (e.g., registration, grades, GPA) over the phone or via e-mail.**

**Students may revoke their authorization at any time by submitting a written cancellation request to the Office of the Registrar.**

**SECTION A. Student information**

Name (Last, first, middle initial) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student ID number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION B. Third party designee (additional designees may be added on the back of this form)**

Name (last, first, middle initial) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relation to Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Information to be released (check all that apply)**

\_\_\_\_ **Academic** (grades/GPA, registration, student ID number, academic progress, enrollment status, class attendance)

\_\_\_\_ **Admission** (date of application, program selected, admission status, conditions of admission)

\_\_\_\_ **Advising** (academic progress, registration, enrollment status, class attendance)   
\_\_\_\_ **Judicial Affairs** (student code of conduct violations)

\_\_\_\_ **Campus Life** (Greek membership, personal conflicts, roommate situations)

**NOTE: A separate form is needed for Student Account and Financial Assistance release.**

**SECTION C. Certification**

I authorize the third party, named in Section B, access to the above indicated student record information.

**Student’s signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_