

FERPA Student Records Access Authorization



1 Enter Student Information:

NAME

STUDENT ID (OR SOCIAL SECURITY) NUMBER CONTACT PHONE

2 In compliance with the federal Family Education Rights and Privacy Act of 1974 (FERPA), the State University of New York at Oswego will not release non-directory student information to a third party (including parents, spouses or corporate sponsors) without written consent of the student. *Non-directory student information includes grades, grade point average, class schedule, and degree progress.*

To authorize SUNY Oswego Registrar staff to talk to a third party (ex. Parent) about non-directory information, please fill in the information below. Completed forms must be presented in person, with appropriate identification, at 301 Culkin Hall OR notarized and mailed to the following address: **SUNY Oswego, Registrar's Office, 301 Culkin Hall, Oswego, NY 13126**

- Requests received by mail that have not been notarized will not be recorded.

This authorization will remain in effect until specifically revoked using the FERPA Revocation of Student Records Access form and overrides any Confidentiality/Directory Exclusion you may have on file. Additional information on FERPA and related policies is available in the *Student Handbook – Code of Student Rights, Responsibilities and Conduct.*

PLEASE NOTE: This form DOES NOT authorize release of financial information. To do so, log on to myOswego and follow directions on the Financial Aid Tab.

3 Access Granted To:

You must complete a separate form for each third party to whom you grant access to information on your student records.

NAME

ADDRESS

EMAIL PHONE

RELATION TO STUDENT

When the party named above contacts the Registrar's Office, he/she will need to identify you using your Student ID and/or other personally identifiable information (SSN, Date of Birth, address, class enrollment). If your third party contact is not able to correctly provide such information, the Registrar's Office will not release any information from your record.

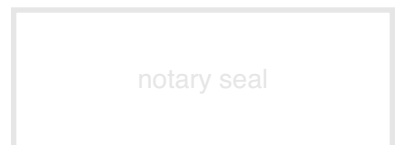
4 Student Authorization:

By signing below, I authorize the Registrar's Office at SUNY Oswego to disclose and discuss my student record information with the individual listed above.

▶ STUDENT'S SIGNATURE DATE

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NOTARY PUBLIC'S SIGNATURE

DATE