



**TRINE UNIVERSITY
AUTHORIZATION RELEASE FORM
FOR ACCESS TO STUDENT
ACADEMIC DEFICIENCY, GRADE, AND ATTENDANCE REPORTS**

The Family Educational Rights and Privacy Act (FERPA) affords certain rights to students concerning the privacy of, and access to their education records. Students may choose to complete and submit this form to the Office of Student Success & Retention allowing the release of their education records to specified third parties. Please note that while this form *authorizes* Trine University to release education to third parties, it does not *obligate* Trine University to do so. Additional information about FERPA can be found at www.trine.edu. The purpose of this disclosure is family communications.

STUDENT INFORMATION

PLEASE PRINT ALL INFORMATION

PRINT – Student Name

Student ID Number (If available)

Home Address, City, State and Zip Code

E-mail address

Student Signature

(Area Code) Cell Phone

Date

I understand that (1) I have the right not to consent to the release of my education records, (2) I have the right to inspect any written records released pursuant to this consent, and (3) I have the right to revoke this consent at any time by delivering a written revocation to the Office of Student Success & Retention. I understand that Trine University is under no obligation to notify me when a request for the release of my education records has been made.

I hereby authorize Trine University to release academic deficiency, grade, and attendance reports to the person(s) named below.

PARENT INFORMATION (REQUIRED)

PRINT – Parent /Guardian(s) Name

Address, City, State, and Zip Code

E-Mail Address & Phone Number

**RETURN THIS FORM TO D. McHENRY, UNIVERSITY CENTER
1ST FLOOR LINK ACADEMIC SUCCESS CENTER**