

Administration Building, Room 2-202 1234 Columbus Ave, Roxbury Crossing, MA 02120 Tel: 857-701-1203 | Fax: 855-670-1795 Email: Registrars.Office@rcc.mass.edu

CONSENT TO RELEASE EDUCATION RECORDS

The Family Educational Rights and Privacy Act (FERPA) of 1974 is designated to protect the privacy of educational records the rights to students concerning the privacy of, and access to, their education records. In compliance with FERPA, Roxbury Community College is prohibited from providing certain information from your student records to a third party (including parents, step-parents, spouse, sponsor etc.) such as information on grades, billing, tuition and fees assessment, Financial Aid (including, but not limited to, your grants, scholarships, and work study) and other student record information. This restriction applies, but is not limited, to your parents, spouse or sponsors. Students may choose to complete and submit this form to the Enrollment Center allowing the release of their education records to specified third parties. Please note that

Photo ID Verified: _____

| limited, to your parents, spouse or sponsors. Students may choose to complete and submit this form to the Enrollment Center allowing the release of their education records to specified third parties. Please note that | | Photo ID Verified: |
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| while this form authorizes Roxbury Community College to release ed College to do so. Roxbury Community College reserves the right to re | | |
| by-case basis. For additional information, visit the website of U.S. Department of Edu | cation at http://www2.ed.gov/policy/ger | n/guid/fpco/ferpa/index.html |
| | | |
| NAME OF STUDENT (LAST, FIRST, MIDDLE) RCC STUDENT ID | | JDENT ID NUMBER |
| SECTION A Education records to be released (check all that ap | ply): | |
| All Records Listed Below | | |
| Academic Information (Grades/GPA, registration, class schedule, courses taken, student ID number, academic progress, enrollment status, academic intervention, honors, transfer credits, academic & administrative holds, awards, degrees, residency status, and mailing address) | | |
| Student Account Information (Billing statement, charges, c information, late fees, billing addresses, financial holds, payment | | |
| Financial Aid Information (FAFSA Application data, eligibility, awards, disbursements, financial aid Satisfactory Academic Progress status, Grants, Scholarships, and Work study) | | |
| Student Conduct Information (Student misconduct incident rep | ports, academic dishonesty reports, Hearin | ngs & hearing results) |
| SECTION B. – Password and Person(s) to whom access to your e | education records may be provided. Ph | noto-identification is required |
| CECTION 2. Lassificia and Leison(s) to Miloti access to your | addation records may be provided. The | ioto identification is required |
| Password Provided by Student | PRINT (Name of individual to whom info | ormation can be released) |
| PRINT (Name of individual to whom information can be released) | PRINT (Name of individual to whom info | ormation can be released) |
| FINITE (Name of individual to whom information can be released) | FRINT (Name of individual to whom line | offilation can be released) |
| PRINT (Name of individual to whom information can be released) | PRINT (Name of individual to whom info | ormation can be released) |
| SECTION C - Certification: (This form must be delivered in-person | on and a photo-ID must be presented at | the time) |
| I understand that (1) I have the right not to consent to the release of released pursuant to this Consent, and (3) this authorization will rem Consent forms with 'Revocation of Consent' section (section D to the Registrar's Office at Roxbury Community College. | nain in effect unless I revoke such conse | nt by filing a new one of these |
| STUDENT'S SIGNATURE | TODAY'S | S DATE |
| SECTION D. – Revocation of Consent | | |
| I hereby revoke the consent granted above for | (Not valid unless received l | by The Registrar's Office) |
| STUDENT'S SIGNATURE | TODAY'S | S DATE |

FERPA103017