Family Educational Rights and Privacy Act (FERPA) Release Form

Faculty and academic advisors may not discuss any information pertaining to a student with any third parties without the student’s written permission under the Family Educational Rights and Privacy Act (FERPA). This federal law gives students the right to access their own educational records and prevents disclosure of those records to third parties (including parents) in many circumstances.

By signing below, the student grants permission to discuss the selected education records with persons designated on this form for the purpose of monitoring the student’s academic progress. The faculty and staff of Clemson University who are covered under this form include: The College of Engineering and Science Advising Center Director and academic advisors, the Director of the General Engineering Program, the RiSE Faculty Director and any course coordinators of the following courses: CH 1010, CH 1020, ENGR 1020, ENGR 1410, ENGR 2080, ENGR 2100. Other courses and departments not mentioned (i.e. English, Mathematical Sciences, Physics, etc.) are not included in the description of individuals from whom disclosures can be made.

This form permits only the faculty and staff listed to discuss the education records identified below with the persons identified below. Students are not required to agree to have student record information disclosed pursuant to this document. A decision to release no information will not impact the student’s academic standing in any way. This release is provided solely for the student’s convenience.

This release will stay in effect as long as the student is under the guidance of the College of Engineering and Science Advising Center, unless the release is revoked in writing. Such revocation shall not affect disclosures made prior to receipt of the revocation.

Student Record

Information to be released: (Please Check One)

___All student education records

___No information to be released

___Only selected information to be released. (Please specify here) __________________________________________________

I hereby grant authorization to the faculty and staff at Clemson University listed above to release the above education records to the persons listed below. I understand that, upon request, I am entitled to a copy of the records disclosed.

Access is granted to: ________________________________ Relationship: ________________

Access is granted to: ________________________________ Relationship: ________________

Signature: ________________________________ Date: ____________________

Student’s Name (please print): ____________________________________________

Please note that even if the student does not sign this release, there may be exceptions under FERPA that would allow Clemson University to communicate information contained in student educational records to parents in particular circumstances. Additional information on FERPA may be found in the Clemson University Undergraduate Announcements, the Clemson University General Counsel Website and the US Department of Education at ED.gov.

March 14, 2013