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FERPA Release Form

It is the policy of Stanly Community College, in accordance with the Family Educational Rights and Privacy Act (FERPA), to withhold personally identifiable information contained in our students' educational records unless the student has consented to disclosure or FERPA allows disclosure. Directory information, such as enrollment, academic honors and degrees, may be disclosed to the public. However, private information, such as address, phone number, grades, class schedules, the student's account, and financial aid awards may not be released without express consent from the student.

	this form provides such consent, according to the information designated for release whom it is to be released.
I,	, Student ID Number,
authorize to the p	ze Stanly Community College to release the following educational records, upon requestersons listed below, for the purpose of keeping them informed regarding my education Community College.
Please	initial all that apply:
	All academic records. All contact information
	All Financial Aid Information. Student Conduct/Discipline
	Disability Services
Person	s to whom information may be released:
Name:_	
Name:_	
Name:_	
records person	wledge by my signature that I understand that, although I am not required to release med, I am giving my consent to release the designated information to the above named (s). I understand that this release will remain in effect unless I revoke such consent in and the revocation is received and processed by Stanly Community College
Studen Date:	t Signature: