

EAST TEXAS BAPTIST UNIVERSITY

One Tiger Drive ~ Marshall, TX 75670 ~ (903) 923-2064 ~ registrar@etbu.edu

OFFICE OF THE REGISTRAR

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT RELEASE OF EDUCATIONAL RECORDS TO THIRD PARTY

East Texas Baptist University is committed to complying with the *Family Educational Rights and Privacy Act* of 1974. Certain student information (called "Directory Information") has been determined as public information under the terms of the act. Directory Information may include release of name, address, telephone number, e-mail address, date and place of birth, photographic images, major field of study, participation in university sports and activities, weight and height of athletic team members, dates of attendance, degrees and awards received, previous educational institutions attended, eligibility for or induction into honors societies programs, etc. <u>Academic, financial, and disciplinary information may not be released without the express written consent of the student. Complete this form to allow any other person(s) access to your academic, financial, and/or disciplinary information.</u>

STUDENT'S NAME (Print legibly):			Student ID		
	First	Middle	Last	Date of Birth	
CURRENT ADDRESS:					
Street		City	State	e Zip Code	
TELEPHONE WHERE YOU CAN BE R	EACHED:				

Please allow the following person(s) access to records as indicated below. Records may include but are not limited to: Academic Records - transcript, grades, grade point average, courses taken, and/or courses required. Financial Aid/Business Office Records – financial aid, course load, and statement of account.

Disciplinary Records – discipline/housing fines, disciplinary probation, and work assignments.

RELEASE TO (third party name):

1				RELATIONSHIP:					
2	First	Middle	Last						
2	First	Middle	Last	KELATIONSHIP:					
3.	THISE		Last	RELATIONSHIP:					
	First	Middle	Last						
IS THIS A	A PERMAN	IENT* RELEASE? 🗌 Y	es 🗌 no	A ONE TIME ONLY RELEASE?	YES 🗌 NO				
*This rele	ease is consi	dered permanent until re	scinded in writing b	by the student.					
PASSW	ORD - Plea	se list your high schoo	l mascot here <u>:</u>						
IF SEEKI	NG INFOR	MATION BY PHONE, T	HIRD PARTIES W	ILL BE ASKED TO IDENTIFY THE M	ASCOT LISTED.				
RELEAS	E IS FOR (C	neck all that apply):							
		EMIC RECORDS / OFFI	CE OF THE REGIS	TRAR & ACADEMIC AFFAIRS					
	🗆 BUSI	NESS OFFICE RECORDS	/ FINANCIAL SEF	RVICES					
		NCIAL AID RECORDS / F	INANCIAL AID OI	FFICE					
		PLINARY RECORDS / ST	UDENT SERVICE	OFFICE					
SIGNAT	URE:			DATE:					
A staj	ff member i	n the Office of the Regist	rar must witness ti	he student's signature on this form. T existing records.	he University reserves	the right to verify sigr	natures against		
THIS FORM MUST BE NOTARIZED IF RETURNED BY MAIL.									
State of		County of		Signed before me this	day of	20			
My com	imission ex	pires							
Signatu	re				FER	PA Release 6/2013			