



CONSENT TO RELEASE EDUCATION RECORDS

Purpose: This form is to be used to collect written consent from a student to release portion(s) of their education record to third parties, to include parents, employers, sponsors, etc. This form may only be used to consent to the release of information from a student's education record.

<p>The education record includes (but is not limited to):</p> <ul style="list-style-type: none"> • Past, current and future courses • Final course grades and grade point averages • Placement test results • Academic actions • Work study records • Financial records related to tuition and financial aid 	<p>The education record does <u>not</u> include the following:</p> <ul style="list-style-type: none"> • Notes of a professor/staff member concerning a student and intended for the professor's/ staff member's own use (e.g., individual exam scores, class attendance and participation, grades on class assignments) • Records of University Police Services • Employment records other than work study • Medical and psychological treatment records • Alumni records
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Student Initials	Expiration of Consent (mm/dd/yy) **	Name(s), Address(es) of Individuals to Whom Records May be Released	Information to be Released
_____	_____	_____	Courses taken and grades received for _____ semester
_____	_____	_____	Additional academic information beyond grades, including but not limited to drop actions, academic probation, failure to be admitted into a major or program, or other academic issues.
_____	_____	_____	Financial records
_____	_____	_____	Work study employment records
_____	_____	_____	The following other information from the student's education record (to be completed by student): _____ _____
_____	_____	_____	
_____	_____	_____	

****Expiration date may not be more than one year from date this form is signed.**

I, _____, authorize The Pennsylvania State University to provide the designated education record to the individual(s) named above for purposes of _____
 I understand that, once this information is released, the information is no longer protected by US Federal law (FERPA) and the confidentiality of the information cannot be assured. This agreement shall remain in effect until the expiration date(s) indicated or until revoked in writing by me. Written revocation must be signed and dated by me and must be delivered to the office maintaining the original release.

Student Signature: _____ PSU ID _____ Date _____