



CONSENT TO THE RELEASE OF EDUCATIONAL & DIRECTORY INFORMATION

**Authorization to Disclose Academic Information:**

In accordance with the federal Family Educational Rights and Privacy Act (FERPA), Ave Maria University (AMU) will not release a student's Educational Information to a third party, unless we have the written consent of the student. Within the limits of the law, however, AMU will consider releasing information from a dependent (as defined by SECTION 152 of the Internal Revenue Code) student's record to his or her parents without the consent of the student.

**Exceptions Permitted Under FERPA**

Ave Maria University accords all the rights under the law to students who are declared **independent**, (as defined by SECTION 152 of the Internal Revenue Code), and personnel within the institution (on a need to know basis), to officials of other institutions in which students seek to enroll, to persons or organizations providing students' financial aid, to accrediting agencies carrying out their accreditation function, to persons in compliance with a judicial order, and to persons in an emergency in order to protect the health or safety of students or other persons. All these exceptions are permitted under the act.

**Educational Information** includes grades, academic progress and deficiencies, class schedules, financial aid, and student billing. This information will not automatically be released, but is available upon written consent by the student.

The purpose of this form is to make clear to whom the student has given consent to receive **Educational Information**.

I, \_\_\_\_\_ (print student name):

Grant **NO** permission to AMU to release confidential Academic information.

Hereby grant permission to AMU to release confidential Educational Information to the following persons:

\_\_\_\_\_  
Parent(s)/Guardian(s)/Other Name(s) (please print)

\_\_\_\_\_  
Relationship(s)

This consent to the Release of Educational Information is to remain valid until my graduation or withdrawal from the University unless I have set an alternative date in the following area: (Please check one)

Graduation/Withdrawal

Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Authorization to Withhold Directory Information:**

The following is considered *directory information* at Ave Maria University (AMU) and will be made available to the general public unless the student notifies the Office of the Registrar in person or in writing:

**Directory Information** includes: Student's name, telephone number, date and place of birth, college, major, honors, awards, photo, class standing, dates of enrollment, degree conferred, dates of conferral, graduation distinctions and the institution attended immediately prior to admission.

Under the provisions of the Family Educational Rights and Privacy Act of 1974 you have the right to withhold disclosure of such directory information. AMU will honor your request to withhold directory information.

Please consider carefully the consequences of any decision to withhold such directory information. Should you decide not to release any of this information, any requests for such information from AMU will be refused. This signed request must be received in the Office of the Registrar. This authorization is valid until a written request to rescind is received by the Office of the Registrar.

I hereby request Ave Maria University **NOT** release any directory information from my academic records. I have read the above paragraphs and understand the consequences of my action.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date