

Admissions and Records

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STUDENT CONSENT FOR RELEASE OF INFORMATION STUDENT WITHDRAWAL OF CONSENT FOR RELEASE OF INFORMATION

Student Name (Please Print)	Student ID#
The Family Educational Rights and Privacy Act (FERPA student's right of access to education records and the Institutions may not disclose information contained consent except under certain conditions. A student' other third parties by providing a written authorization.	e confidentiality of student information. in education records without the student's written s record may be released to parents, guardians or
STUDENT CONSENT FOR RELEASE OF INFORMATION	
I hereby give my consent for my parents, guardian o to my education records. I understand that each ind time of release to view my records.	
Student's Signature	 Date
One time only. This box must be checked if y Parent/Guardian/Third Party (Please Print) 1)	you wish this to cover a one-time only release.
Name	Relationship
2)	Relationship
Name	Relationship
STUDENT WITHDRAWAL OF CONSEI	NT FOR RELEASE OF INFORMATION
I hereby withdraw my consent for my parent, guardi access to my education records, effective immediate information, I understand that I will have to complet	ely. If I wish to reinstate the consent for release of
Student's Signature	 Date