## **FERPA Release Form**

## Family Educational Rights and Privacy Act



Last Name:	First Name:	Student ID:
	nily Educational Rights and Privacy Act adents' rights to privacy regarding their	
form and returning it to Ac year after the student gradu		• •
STEP 1: ACADEMIC INF	ORMATION RELEASE	
	fic University permission to release my a ease include each individual for whom you wish	
Person #1 Name:	Relation	onship:
Person #2 Name:	Relation	onship:
Person #3 Name:	Relation	onship:
provide the Release Code.  It is the student's response	ential academic information, the individual Please create a release code (word or phasibility to provide the code to the individual)	rase) and write it below.  viduals listed above.
STEP 2: SIGNATURE		
Student Signature:		Date:
STEP 3: SUBMIT TO WP	U RECORDS OFFICE	
Submit at Upper Egtvedt H	Iall or via email at records@warnerpacif	<u>ic.edu</u> . Phone: 503-517-1515
OPTION TO REVOKE/CA	ANCEL	
<u>*</u>	oke/cancel this release at any time. Pacific University Records Office if you	wish to revoke/cancel the release.
OFFICE USE ONLY Date Received	Initials Date Revoked	Initials