



# FERPA RELEASE FORM

277 Rancheros Drive, Suite 200  
San Marcos, CA 92069  
Tel: 760.471.1316 • Fax: 760.471.1314  
Registrar@usk.edu

## STUDENT INFORMATION:

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
CELL NUMBER

\_\_\_\_\_  
EMAIL ADDRESS

I give permission to the University of Saint Katherine to release the selected information to the recipient listed for the purpose of providing access to parents, scholarship application, reimbursement from employer or other source, etc.

## TYPES OF INFORMATION TO RELEASE:

| Check                    | Name                    | Description   |
|--------------------------|-------------------------|---|
| <input type="checkbox"/> | All Records             | ALL records listed below.   |
| <input type="checkbox"/> | Accounting              | Includes tuition and fee balances, financial holds, mailing and billing address, payment plans, accounting statements, collections and debt information.    |
| <input type="checkbox"/> | Registration            | Includes current enrollment, dates of enrollment activity, enrollment status, residency status, semesters attended and mailing address information.         |
| <input type="checkbox"/> | Academic Records        | Includes courses taken, grades received, GPA, academic progress, honors, transfer credit awarded and degree(s) awarded.                                     |
| <input type="checkbox"/> | Financial               | Includes all general financial information.   |
| <input type="checkbox"/> | Admissions              | Includes dates of application, programs selected, documents received, documents pending, dates of admissions, admission status and conditions of admission. |
| <input type="checkbox"/> | Athletics               | Includes all general athletic information and student information.  |
| <input type="checkbox"/> | Housing                 | Includes all general housing information and student information.   |
| <input type="checkbox"/> | Cancel Previous Release | Cancels any previous request.   |

## INDIVIDUAL (OTHER THAN STUDENT) THAT STUDENT ABOVE AUTHORIZES A RELEASE OF INFORMATION TO:

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
CONTACT #

\_\_\_\_\_  
RELATIONSHIP

\_\_\_\_\_  
EMAIL ADDRESS

This authorization is valid until canceled. The student may cancel this release at any time by submitting another FERPA form to the University of Saint Katherine Office of Admissions and the Registrar.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE