

FERPA DISCLOSURE AND RELEASE

SEAL

Student Name:	Student ID #:	
identifying information from a student's red written consent. This form prohibits the rele picture ID or by subpoena. Sponsoring agend Type of record to be released:	cord to a third party (parent, spous ease of student records, except who sies may request information prior ords (transcripts, attendance, prog Billing	
DO NOT SIGN this form until you are presen	ting your ID to a Student Services re	epresentative at Davis Tech or a Notary Public.
picture ID. By indicating an email address, Down when inquiring by telephone, the person w	avsTech officials may correspond via ill be REQUIRED to provide a passw les who provide funding for a stude	rson will be REQUIRED to provide state-issued a email with the person using that email address. For to have access to my information. Entities will ent (Department of Workforce Services, Vocational financial aid information.
Name:	Relationship:	Date of Birth:
Email Address:		Phone Number:
Password:		
Name:	Relationship:	Date of Birth:
Email Address:		Phone Number:
Password:		
Entity: (Department of Workforce Services, \ Student's Signature	ocational Rehabilitation, etc.)	
Student's Signature	Da	le .
Witness Signature		te
Processed By		te
Notary Public Information: This form must original notarized form must be submitted to		e presence of a Davis Tech representative. The
Notary Public		State of
My Commission Expires		County of

Date