

## **FERPA RELEASE FORM AUTHORIZATION TO RELEASE INFORMATION:**

California University of Pennsylvania: provides for the confidentiality of student records in accordance with the Family Educational Rights and Privacy Act (FERPA), as amended. Accordingly, in order for our office to be able to discuss your information with your parents, spouse, or other persons who you designate, you must authorize the Office of Academic Records, The release of any or all school records and/or grades, as requested to:

### **To release the aforementioned information to the following persons:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

I \_\_\_\_\_ certify that the information on this application is true and correct.

*Print name neatly*

Signature: \_\_\_\_\_

CWID#: \_\_\_\_\_ Date: \_\_\_\_\_