



FERPA RELEASE

This form serves to grant other individuals access to speak with staff in the following offices about a student as indicated.

Please print clearly using black or blue ink

Student Full Name (including middle name): \_\_\_\_\_

Student Date of Birth: \_\_\_\_\_ Student email: \_\_\_\_\_

USC ID (VIP ID): \_\_\_\_\_ Current Term: \_\_\_\_\_

I, \_\_\_\_\_, authorize the following person/people to have access to speak with office staff checked below.

\_\_\_\_\_ Admissions regarding applications, missing credentials (after registration)

\_\_\_\_\_ Financial Aid regarding awards, loans

\_\_\_\_\_ Student Account Services regarding tuition and fees, payments

\_\_\_\_\_ Records and Registration regarding grades and academic progress.

\_\_\_\_\_ Dean of Students/Vice Chancellor of Student Affairs office.

ALLOWED INDIVIDUALS:

\_\_\_\_\_  
Name Relationship to Student

\_\_\_\_\_  
Name Relationship to Student

\_\_\_\_\_  
Name Relationship to Student

I understand that I must sign and submit a new FERPA release each academic year.

\_\_\_\_\_  
Student Signature Date

If mailing, faxing, or emailing this form, include a clear copy of the student's driver's license for verification.