



ST. MARY'S COLLEGE
 200 East Mission Street
 St. Mary's, Kansas 66536
 (785) 437-2471

Rev. Fr. John Fullerton, Rector
Dr. Joseph Strong, Academic Dean

STUDENT INFORMATION ACCESS FORM

Name: _____ **Date:** _____
 Last First MI

The Family Education Rights and Privacy Act (FERPA) affords certain rights to students concerning the privacy of and access to educational records. Students may choose to complete and submit this form to the Registrar allowing the release of educational records to specified third parties. This form authorizes but does not obligate St. Mary's College to release information. The College reserves the right to review and respond to release requests on a case-by-case basis.

A) INFORMATION TO BE RELEASED (*check all that apply*)

- Contact Information
- Academic Records (grades/transcript, enrollment status, student ID)
- Student Account Information (status, statements, charges, credits, payments, penalties)
- All Records
- Other (please specify) _____

B) PARTIES TO WHOM ACCESS MAY BE PROVIDED (*check all that apply*)

- Parents/Guardians
- Religious (please specify) SSPX Diocesan
- Other (please specify) _____

 Name(s)

 Contact Information (address, phone, e-mail); provide additional contact information on the reverse

C) PURPOSE OF RELEASE (*check one*)

- Family Communication
- Application for employment
- Application for Admission to Educational Institution
- Other (please specify) _____

D) DURATION OF RELEASE (*check one*)

- One-time use
- Limited use: Authorization expires on _____
- Perpetual

I understand that, 1) I have the right not to consent to the release of my information, 2) I have the right to inspect any written records pursuant to this consent, and 3) I have the right to revoke this consent via written request to the Rector.

 Student signature (Date)

 Parent/guardian signature (if under 18) (Date)