

**LEWIS & CLARK COLLEGE  
STUDENT AUTHORIZATION TO RELEASE  
EDUCATIONAL RECORD INFORMATION**

In accordance with regulations contained within the Family Educational Rights and Privacy Act, Lewis & Clark College will only disclose information from the educational records of a student to a third party if the College has written consent from the student.

STUDENT, please sign this form and return to the Registrar's Office if you wish to provide consent for the release of your educational records to the parties you designate below.

I hereby authorize Lewis & Clark College school officials to release my educational records to the following (You must list the records that may be released below):

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

This release does not permit the disclosure of records to any other persons or entities without my written consent unless specifically allowed for within **FERPA** regulations. I understand that I may revoke this authorization at any time.

\_\_\_\_\_  
Student's Printed Name Date

\_\_\_\_\_  
Student's Signature Student ID Number

Specific records to release (if all records may be released, indicate by saying "Any Educational Records Requested"):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_