



Consent Form for Disclosure of Education Records

Student's First Name	Middle Initial	Last Name
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Permanent Street Address	City	State	Zip Code
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I consent to the disclosure of any personally identifiable information from my education records, including my academic file, student account, financial aid received/pending, or loans that have been/will be disbursed to me, to individuals identified by me below. I understand this authorization will remain in effect until a written or online request for a change has been provided.

Signature: _____ Date: _____

I release my information to the following individuals: *(If individuals live at the same street address, please list both in #1)*

1. _____	2. _____
Name(s)	Name(s)
_____	_____
Address	Address
_____	_____
City, State, Zip	City, State, Zip
_____	_____
Phone	Phone

**Students cannot be denied any educational services from Oakland City University if they refuse to provide consent.*

I do not wish to disclose any personally identifiable information from my education records, except as permitted under the Family Educational Rights and Privacy Act (FERPA).

Signature: _____ Date: _____

Directory information, which is information that is generally not considered harmful or an invasion of privacy if released, can be disclosed to outside organizations without prior written consent. If you do not want Oakland City University to disclose directory information without your consent, you must notify the Oakland City University Registrar in writing. Directory information is defined in the student handbook.

*****Students under 26 years of age please see reverse side.*****



Undergraduate students under 26 years of age: Under the Family Educational Rights and Privacy Act (FERPA), Oakland City University is permitted to disclose information from your education records to your parents if your parents (or one of your parents) claim you as a dependent for federal tax purposes. Please indicate whether your parents claim you as a tax dependent.

Please check the appropriate box:

- Yes. I certify that my parents claim me as a dependent for federal income tax purposes.
(Please provide name and contact information in the consent section.)
- No. I certify that my parents do not claim me as a dependent for federal income tax purposes.

Signature: _____

Date: _____

If you are not claimed as a dependent or do not know whether you are claimed as a dependent for federal income tax purposes, but you agree that Oakland City University may disclose information from your education records to your parents, please list your parents in the consent section.