



RELEASE OF INFORMATION TO THIRD PARTY CONSENT FORM

In accordance with the Family Educational Rights to Privacy Act (FERPA), Piedmont Virginia Community College protects the personally identifiable information within students' educational records. FERPA limits the release of educational records, except in those cases where a student provides written authorization. By completing this form, you are authorizing Piedmont Virginia Community College to release information contained within your records.

Name: _____

PVCC Student ID#: _____ Phone: _____ Email: _____

By signing below, I authorize the following person(s) to have access to my educational records and allow them the freedom to discuss these records with College officials:

Name: _____

Relationship to student: _____

Please check all that are applicable:

Class attendance ___ Enrollment information ___

Grades ___ Financial aid information ___

Disciplinary action/issues ___ Other ___

STUDENT'S SIGNATURE: _____ Date: _____

Additional notes: Please return the completed form in person to the Admissions & Advising Center (Bolick room 223) and present appropriate ID. To return by email, this form must be submitted through the student's email.vccs.edu account to be considered certified permission from the student.

<p><u>Records Office Use</u></p> <p><u>Only</u></p> <p>Date Filed: _____</p> <p>By: _____</p>

PVCC does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding nondiscrimination policies: Kim Van Savage, Chief Human Resources Officer, kvansavage@pvcc.edu, 434-961-6567, 501 College Drive, Charlottesville, VA 22902.