

Enrollment Services

AUTHORIZATION TO RELEASE STUDENT INFORMATION

This form must be submitted by the student, with valid ID, to Brotman Hall 101 or as an attachment via email if the student is not in attendance on the CSULB campus. The form must be sent from the email address on record for the student.

Student Name (Last, First, MI) _____ Student ID: _____

I give permission to CSULB to release specified information to the following individual(s):

Last Name	First Name	Relationship

Types of information authorized for release (indicate all applicable records):

All Records

Academic Records Includes courses taken, grades received, GPA, academic progress and degree(s) awarded.

Admission Records Includes dates of application, documents received, admission status and conditions of admission.

Disciplinary Records

Financial Aid Includes application status, information from my financial aid application not pertaining to others, award details and Satisfactory Academic Progress status.

Student Financial Services Includes tuition and fee balances, financial holds, payment plans, etc.

Transcripts

Other (please specify) _____

Please choose at least one personal security question based on the choices below, and provide the answer to the authorized individuals listed above. When that party contacts CSULB, he/she will be asked to authenticate his/her identity by providing the answer to the security question. If your third-party contact is unable to provide the correct answer, no information will be released. If you forget or misplace your personal security question/answer, contact Enrollment Services at (562) 985-5471 or Brotman Hall 101 to recover and/or change the information.

_____	_____	_____	_____
Elementary School	Favorite Teacher	Favorite Pet's Name	First Automobile make/model

In accordance with The Family Educational Rights and Privacy Act (FERPA) of 1974, CSU Long Beach will disclose confidential information from the education records of students to parents, spouses or other third parties provided the University has written consent from the student on file. Please sign below and return to the Office of Enrollment Services if you consent for the University to release your education records to your parents, spouses or any other third party. This release form will remain valid through your enrollment at CSULB unless specifically revoked by you. To learn more about FERPA and the release of student information, visit http://web.csulb.edu/depts/enrollment/student_academic_records/releasing.html

I understand this information may be released orally or in the form of copies of written records, as preferred by the requester. I have a right to inspect any written records released pursuant to this consent, and I may revoke this consent at any time by submitting a written request to do so.

Student Signature _____ Date: _____

Revoke Authorization: By signing below, I hereby revoke any prior authorization for CSU Long Beach to disclose my education record information with the individuals listed above, effective immediately.

Student Signature _____ Date: _____