



FERPA CONSENT TO RELEASE STUDENT INFORMATION

TO: Great Oaks Campus Dean

Please provide access to the educational records of _____ (“Student”) to:

The only type of information that is to be released under this consent is:

- disciplinary records
- recommendations for employment or admission to other schools
- all records
- other (specify): _____

The information is to be released for the following purpose:

- communications about school events and programs
- communications about attendance, grades, discipline, homework and other school-related matters
- other (specify): _____

I understand I may revoke this Consent upon providing written notice to the Campus Dean. I further understand that until revocation is made, this Consent shall remain in effect and the educational records for the Student will continue to be provided to the person listed above for the specific purpose described above.

Name of student (print) _____

Signature _____

Date _____

If student is a minor, please include the following:

Parent’s name (print) _____

Parent’s signature _____