



**AUTHORIZATION FOR RELEASE OF
INFORMATION**
FAMILY EDUCATIONAL RIGHTS & PRIVACY ACT (FERPA)

Student Information

<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	Last Name	Student ID #
<input type="text"/>	<input type="text"/>	
Phone #	E-Mail Address	

I authorize the College of Menominee Nation to discuss and/or release the selected educational information to the recipient(s) listed below by phone, letter, or in person. I further understand that copies of educational information are prohibited and appropriate request procedures will be followed when applicable. Current fees will also apply.

Types of Education Information to Release

	Department	Description
<input type="checkbox"/>	All Records	ALL records listed below without limitation
<input type="checkbox"/>	Admissions	Includes dates of application, program selected, documents received, documents pending, dates of admission, admission status and conditions of admission
<input type="checkbox"/>	Bursar (student billing)	Include financial and billing
<input type="checkbox"/>	Financial Aid	Include financial aid award, financial aid status, verification documents
<input type="checkbox"/>	Registrar	Includes current enrollment, dates of enrollment activity, enrollment status, semesters attended and mailing address information, grades, transcripts, records of disciplinary proceedings, scheduling and registration documents
<input type="checkbox"/>	Revoke Previous Release	Revoke any previous request List Name of person or agency: <input type="text"/>

Individual(s) or Agency to Release Information To

<input type="text"/>	<input type="text"/>	<input type="text"/>
Full Name	Contact #	Relationship if applicable
<input type="text"/>	<input type="text"/>	<input type="text"/>
Full Name	Contact #	Relationship if applicable

This authorization is valid until cancelled. The student may cancel this request at any time by submitting another FERPA form to CMN Registrar Office.

<input type="text"/>	<input type="text"/>
Student's Signature	Date

Office Use Only

Received by: _____ Date: _____ Entered into Empower: _____