



Missouri State.

# Release of Information Authorization Form

(to be completed by student)

Missouri State University (the "University") complies with the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g ("FERPA") and FERPA's implementing regulations, 34 C.F.R. § 99.1, *et seq.* Subject to certain exceptions, the University does not disclose a student's educational records and information to others without the student's written authorization. Students may sign this Release of Information Authorization Form to authorize the University to disclose the students' education records and information subject to the law, applicable policies, and the parameters and restrictions set forth below. This Release will be effective only for purposes of the records maintained by the person(s) and/or office(s) to which the student delivers the form.

Information about the University's FERPA compliance is available on the University's FERPA webpage ([missouristate.edu/ferpa](http://missouristate.edu/ferpa)) and in the University's Notification of Student Rights Policy (<http://www.missouristate.edu/registrar/ferpanotification.htm>).

I hereby authorize \_\_\_\_\_ office(s) of Missouri State University to disclose the following education records and/or information (check all that apply):

- Transcript records (e.g., GPA, classes taken, grades, major)
- Conduct (disciplinary) records
- Financial records
- Other (please describe) \_\_\_\_\_

To the following individuals and/or organizations (include name and mailing address):

For the following purpose: \_\_\_\_\_

This authorization may be revoked in writing at any time by delivering a written revocation to the same person(s) and/or office(s) to whom you deliver this authorization. Absent such revocation, this authorization shall remain in effect until \_\_\_\_\_ (if this blank is left empty, the authorization will remain in effect indefinitely unless and until it is revoked).

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
"M" Number

\_\_\_\_\_  
Student Signature\*

\_\_\_\_\_  
Date

\*The University reserves the right to contact the student to authenticate the student's signature before disclosing records or information. Alternatively, the student may sign this form before a University official or provide a valid acknowledgement duly executed by a licensed notary public. Some offices collecting this form may require a notarized signature.