

## AUTHORIZATION TO RELEASE INFORMATION

Return this completed form to the appropriate office or by email from your Oberlin.edu account.

In accordance with the Family Education Rights and Privacy Act of 1974 (FERPA, or the Buckley Amendment), which requires that colleges and universities protect the privacy of student records, it is Oberlin College's policy NOT to release non-directory information to anyone other than the student unless the student has given us express written permission to do so. Please note that this limitation includes parents and guardians. Students who would like to authorize someone other than themselves, including a parent or guardian, to have access to their information should complete this form.

The complete policy with regard to Student Records at Oberlin can be found in the Student Rights and Responsibilities, <https://www.oberlin.edu/dean-of-students/student-conduct/resources>, see Academic and Enrollment Policies.

### I. Student Information

Student name (printed)

Student T#

### II. Office authorized to release information:

*Offices may only release information that is maintained by that office; if you would like to authorize the release of information from more than one office, a separate release must be completed for each office.*

#### Office of the Dean of Students

135 West Lorain Street, Wilder Hall Room 105  
Oberlin, OH 44074-1078

### III. This office is authorized to release information pertaining to:

*Check all that apply.*

Conduct related information

Other : \_\_\_\_\_

### IV. Person(s) to whom information may be released

Name (printed)

Relationship to student

Name (printed)

Relationship to student

### V. Authorization

I authorize the above named office to release information maintained in that office's records. This authorization will remain in full force and effect for the current academic year or until the end of the current academic year or a sooner date as specified here (Date: \_\_\_\_\_). If I wish to revoke this authorization I will contact the office to which it was given.

Student signature

Date

Name of witness (printed)

Signature

Date