

STUDENT INFORMATION RELEASE AUTHORIZATION FORM

In compliance with the federal Family Educational Rights and Privacy Act of 1974 and the Regents' Policy on Access to and Release of Student Education Records, Saint Xavier University is prohibited from providing certain information from your student records to a third party, such as information on grades, billing, tuition and fees assessments, financial aid (including scholarships, grants, work-study, or loan amounts) and other student record information. This restriction applies, but is not limited, to your parents, your spouse, or a sponsor.

You may, at your discretion, grant the University permission to release information about your student records to a third party by submitting this Student Information Release Authorization Form fully completed. You must complete a separate form for each third party to whom you grant access to information on your student records. The specified information will be made available only if requested by the authorized third party. The University does not automatically send information to a third party.

Submit your completed form to the Office of Records and Registration, Saint Xavier University. Please note that your authorization to release information has no expiration date; however, you may revoke your authorization at any time by sending a written request to the same address. This form allows third parties to access student record information from Saint Xavier University. **NOTE:** For the third-party designee you name on this form, this release overrides all FERPA directory suppression information that you have set up in your student record. *However, it is University policy not to release certain aspects of student records (e.g., registration, grades, GPA) over the phone or via email.*

This information release authorization is intended for use only by the Office of Records and Registration.

A. STUDENT INFORMATION

NAME (LAST, FIRST, MIDDLE INITIAL)	STUDENT ID NUMBER
CURRENT ADDRESS (STREET/PO, APT, CITY, STATE, & ZIP)	DAYTIME PHONE
B. THIRD-PARTY DESIGNEE	
NAME (LAST, FIRST, MIDDLE INITIAL)	SNN (LAST 4 DIGITS)
CURRENT ADDRESS (STREET/PO, APT, CITY, STATE, & ZIP)	DAYTIME PHONE
RELATION TO STUDENT	EMAIL ADDRESS
INFORMATION TYPES ALLOWED (CHECK ONE OR MORE OF T	THE BOXES BELOW TO GRANT AUTHORIZATION)
Grades/GPA, demographic, registration, student ID number, academ	ic progress status, and/or enrollment information
Billing statements, charges, credits, payments, past due amounts, and	d/or collection activity
□ Financial aid awards, application data, disbursements, eligibility, and/	or financial aid satisfactory academic progress

- □ University-maintained loan disbursements, billing and repayment history (including credit reporting history), communication history, balances, and/or collection activity
- Disclosure of conduct/disciplinary records maintained by the Office of the Dean of Students
- Access to student records maintained by the Office of Records and Registration, the office of Student Financial Aid, and the Bursar's Office including all of the above examples.

C. STUDENT SIGNATURE