

University of Oregon
Student Consent to Release Records and Information
Procedure for Release of Student Education Records

The University of Oregon Student Records Policy, in compliance with the Family Educational Rights and Privacy Act (FERPA), requires the written consent of the student authorizing the disclosure of non-directory information from his or her records. The authorization to disclose information must include: what specifically is to be released from the students records; to whom the information is to be released; the purpose for the release; the date and the students signature. The Student Consent to Release Records and Information form (below) can be used to assure that faculty and staff meet the legal obligations of FERPA when responding to student requests for letters of recommendation or reference, or any other situation that may require the disclosure of non-directory information (e.g., the form may be used when students participate in activities that require disclosure of non-directory information to third parties with no legitimate educational interest, such as honors groups, social clubs or sports organizations.) You may print this form and present it to any student making a request for reference or recommendation and ask them to complete it. A copy of this form must be retained for the life of the educational record from which information was released.

Full Name UO ID No.

1. I hereby give the University of Oregon permission to release the following records (describe the records):

Records indicating performance and/or progress in OPP courses and practicum experiences.

2. The records identified in number 1 above may be released to the following person (specify - give name if known - who may receive records, e.g. graduate program admissions director, dean of a college, parent, attorney, potential employer):

3. The records identified in number 1 may be released for the following purpose (specify why you want the above person to have the records, e.g. for a job application, to release funds from a trust):

4. I understand that I have the right to request, in writing, a copy of all records disclosed under this release. I also understand that the charge of \$.25 per sheet may be assessed for copies of documents.

This consent to release records and information is made freely and voluntarily and shall remain in effect until revoked by me in writing, or until _____.

A copy or facsimile of this release shall be as valid and effective as the original.

Signature: Date:

This document will be filed in the offices of the Director of the PE & REC Outdoor Pursuits Program.