

STUDENT CONSENT FOR RELEASE OF DISCIPLINARY RECORDS

Name of Student (Last, First, Middle Initial)	Banner ID or DOB	Local Phone or E-Mail

“The Family Educational Rights and Privacy Act of 1974,” as amended (“FERPA”) affords students certain rights with regard to their respective education records. In essence, these rights are (1) the right to inspect and review education records, (2) the opportunity to challenge the contents of education records, and (3) the right to exercise some control over the disclosure of information from education records.

This form allows release of disciplinary records, which are considered educational records, within forty-five (45) days of receipt. Please note that while this form authorizes the Office of Student Conduct to release disciplinary records to specified third parties, it does not obligate the Office of Student Conduct to do so. The Office of Student Conduct reserves the right to review and respond to requests of disciplinary records on a case-by-case basis. Additionally, please note that this release does not override any parent access given through AppalNet or the Registrar’s Office, or any exception provided for by federal law.

For additional information, please visit *ASU Policy 105.3 - Policy Statement on the Family Educational Rights and Privacy Act of 1974, as Amended* at <http://policy.appstate.edu>.

Disciplinary Records to be Released (check one)	
<input type="checkbox"/> All Disciplinary Records (<i>must be selected to release records for employment or admission purposes</i>)	
<input type="checkbox"/> Specific Disciplinary Record(s) (<i>please list Case Number</i>): _____	
Individual(s)/Institution(s)/Agency(ies) to Whom Disciplinary Records May be Provided (including self)	
Name(s) (<i>use additional pages if necessary</i>) _____	
Address(es) _____	
Phone Number(s)/Fax Number(s)/E-Mail (<i>list any that are applicable</i>)	Relationship to Student

Duration of Release (check one)	
<input type="checkbox"/> One-Time Use: This authorization can be used only once.	
<input type="checkbox"/> Limited Use: This authorization expires on _____	
Purpose of Release (check one)	
<input type="checkbox"/> Family Communications	<input type="checkbox"/> Attorney/Advisor Communications
<input type="checkbox"/> Employment	<input type="checkbox"/> Admission to an Educational Institution
<input type="checkbox"/> Other (<i>please specify</i>): _____	
Delivery Method (check one)	
<input type="checkbox"/> Hand-Delivery <input type="checkbox"/> Mail <input type="checkbox"/> E-Mail <input type="checkbox"/> Other (<i>please specify</i>): _____	
I understand that (1) I have the right not to consent to the release of my disciplinary records, (2) I have the right to inspect any written records released pursuant to this Consent, and (3) I have the right to revoke this Consent at any time by delivering a written revocation to the Office of Student Conduct.	
Student’s Signature	Date
_____	_____

Note: The form must be fully completed and signed by the student. Records cannot be released if any section is not completed in its entirety. Completed forms should be submitted to the Office of Student Conduct via hand-delivery (324 Plemmons Student Union), fax (828-262-4997), e-mail (studentconduct@appstate.edu), or mail (Rm. 324, Plemmons Student Union, P.O. Box 32084, 263 Locust Street, Boone, NC 28608-2084).