



Authorization to Disclose Academic Information & Grades

Directions: Complete this form if you would like to give permission for Madison College faculty or staff to discuss academic-related information with a third party including employers. You need to complete a separate form for each class, instructor or staff for whom you are authorizing permission to release. After completing the form, give it to the faculty/staff member. We recommend also keeping a copy for your records.

Student Name

Student ID

The Family Educational Rights and Privacy Act of 1974 (FERPA) was designed to protect the privacy of educational records, to establish the rights of students to inspect and review the educational records and to provide guidelines for the correction of inaccurate or misleading data through informal and formal hearings. Students also have the right to file complaints with the Family Policy Compliance Office concerning alleged failures by the institution to comply with the Act.

In accordance with FERPA, Madison Area Technical College will disclose information from the academic records including but not limited to grades, attendance and disciplinary action of a student provided the College has on file the written consent of the student.

If you consent for the instructor/staff to release your academic-related information and grades to another party, please sign below and return this form to the instructor/staff. This authorization must be completed for each class for each individual for which the student authorizes the release of academic information to another party.

Revocation prior to the end date specified below must be submitted directly to the individual for whom the release is authorized. Revocation is effective immediately upon separation of employment of the authorized individual listed below if such occurs prior to the end date specified.

I authorize (Madison College staff/faculty) _____ to release my academic-related information, including grades, in class name _____ to the following party/parties: _____ starting on date _____ and ending on date _____.

Signed By _____

Date

For staff or faculty receiving this release, it is recommended to document and attach summaries of information disclosed as part of this release. This release should be kept for a period of time not to exceed seven calendar years after expiration (ending on date above). This release should be stored in a confidential and secure location. This release is not imaged to the student's academic record.