

## THE FAMILY EDUCATION RIGHTS AND PRIVACY ACT

Consistent with the Family Educational Rights and Privacy Act (FERPA) or 1974, as amended by S. J. Res 40 (12-30-74), the following statement represents the position of Concordia University Wisconsin with respect to the confidentiality of student records.

The Act assures students "the right to inspect any and all official records, files, and data directly related..." to themselves, and assures the student an opportunity for debate or correction of inaccurate, misleading, or otherwise inappropriate data in the student's file.

The Act provides that no party may review a student's record with the exception of the following, who do not need written consent of the student to view a record: other school officials, officials of other schools or systems in which the student intends to enroll, authorized representatives of (1) the Comptroller General of the U.S., (2) the Secretary of H.E.W., (3) administrative head of an education agency and (4) state educational authorities. Persons working in connection with a student's application for, or receipt of, financial aid. Any other than those listed above can obtain access to a student's file only upon written release from the student. This record will be available for inspection only by the student. The following procedure has been established for CUW students. A written request, signed by the student shall be presented to the Registrar or appropriate office. The Registrar, or other appropriate office will arrange a time and date, within 45 days after receipt of the request, for the student to review the record.

The following types of information are considered directory information and may be included in publications or disclosed upon request without consent of the student, but only after public notice of these categories of information has been given in order to allow sufficient time for the student to inform the institution that any and all of this information should not be released without prior consent, such requests can be made in writing to the Registrar's Office:

- student's name
- address including e-mail
- telephone number
- dates of attendance
- photo
- class standing and class schedules
- previous institution(s) attended
- major field of study
- awards
- honors (including Dean's List)
- degree(s) conferred (including date)
- past and present participation in official recorded sports activities
- physical factors (height, weight of athletes)
- date and place of birth

The Act provides the student the right to file with the U.S. Department of Education a complaint concerning alleged failures by the education institution to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office - U.S. Department of Education  
600 Independence Avenue, SW - Washington, DC 20202-4605

**Please Read:** Consistent with the Family Educational Rights and Privacy Act (FERPA) of 1974, as amended in 34 CFR Part 99 (12/09/08), Concordia University Wisconsin has established this form to provide students with a vehicle to release FERPA protected information to a third part (e.g. parents, employer).

For a complete statement of student's rights under FERPA, you may obtain a copy through any one of the means listed below:

PDF: (attached above)  
E-mail: regstu@cuw.edu  
Requests Through U.S. Mail: Concordia University Wisconsin  
Office of the Registrar, 12800 North Lake Shore Drive, Mequon, Wisconsin 53097

### Release of Student's Educational Record

Student Requesting record to be released \_\_\_\_\_ F00 \_\_\_\_\_  
print name Banner ID#

CUW Student's Home Address \_\_\_\_\_  
street  
\_\_\_\_\_ city state zip code

**Please release my educational record as initialed below to the following individual/party.**

Send to: Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
street  
\_\_\_\_\_ city state zip code

**Please release the following educational record(s) (student initials in each box). Note that this release is for one academic year. Student must resubmit this form each academic year.**

**Grades from** \_\_\_\_\_  
Semester (fall/Winterim/spring/summer) Year

**Student Conduct Records from** \_\_\_\_\_  
Start date (mo/day/year) End date (mo/day/year)

**Student Aid Financial Records**

**Student Account Records**

**Academic Dishonesty Records**

**Other** (please be specific, record for what time period) \_\_\_\_\_

**I, the undersigned student, give permission to release my educational record(s) as noted above to the individual/party listed above:**

Signed (student) \_\_\_\_\_

Date \_\_\_\_\_