

Release Of Information



COMMUNITY AND
TECHNICAL COLLEGE

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This form must be completed in the presence of Registrar Office staff or with a notary. Proper photo identification must be presented along with this form. In the case of a notary form, a copy of the same photo identification used with the notary must be submitted with this form.

It is Blue Ridge Community and Technical College's policy NOT to release non-directory information to anyone other than the student, unless the student has given us express written permission to do so. Please note that this limitation includes parents and guardians, regardless of student age. This is in accordance with the Family Education Rights and Privacy Act of 1974 (FERPA, or the Buckley Amendment), which is a federal law that protects the privacy of student education records.

Blue Ridge Community and Technical College is bound by FERPA in matters pertaining to rights of access and the disclosure of information in your education records. The College may provide access to said information in accordance with your declaration, as indicated below.

Student Name: Student ID:

By signing below, I authorize Blue Ridge Community and Technical College to release information regarding my college career at this institution to the following person (a separate form must be completed for each person you are releasing information to):

Name/Agency: Relationship to Student:

Address:

Telephone/E-Mail Access Password: A FERPA password must be used by the individual/agency named above when requesting information via phone or email. Access will not be permitted over the phone or email without this password. **Do not use your birth date, social security number, or school ID number.** Your password can be any combination of letters and numbers.

FERPA Password:

The information checked below can be released, in written or oral form to the person/agency listed above:

- | | |
|---|--|
| <input type="checkbox"/> Financial Aid information | <input type="checkbox"/> Accessibility information
(accommodations, disability, absence requests) |
| <input type="checkbox"/> Scheduling and/or registration information | <input type="checkbox"/> Record of administrative hearings or proceedings |
| <input type="checkbox"/> Academic progress and course grades | <input type="checkbox"/> Other: <input type="text"/> |
| <input type="checkbox"/> Admissions information | |

I understand that (1) I have the right not to consent to the release of my educational records; (2) I have the right to inspect and review such records upon request; and (3) this consent to release or disclose shall remain in effect for my entire enrollment period at Blue Ridge Community and Technical College unless revoked by me in writing.

Registrar Office Signature: Date:

DO NOT SIGN UNTIL YOU ARE IN THE PRESENCE OF A MEMBER OF THE REGISTRAR'S OFFICE.

Student Signature: Date:

If the student is unable to appear in person at the Registrar’s Office at Blue Ridge Community and Technical Center, and would like to complete a Release of Information, the student must provide:

Student Name: _____ Student ID: C

A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below. Please check which government issued documentation you are attaching. You must provide a copy of this with the notary statement when submitting to Blue Ridge CTC:

☐ Driver’s License

☐ Passport

☐ Photo Identification Card

☐ Other:

☐ Military ID

YOU MUST ATTACH A COPY OF THE IDENTIFICATION USED WITH THE NOTARY WHEN SUBMITTING THIS FORM.

Notary’s Certificate of Acknowledgement

State of _____ City/County of _____

On _____, before me, _____,
(Date) (Notary’s name)

personally appeared, _____, and provided to me on
(Printed name of signer)

basis of satisfactory evidence of identification _____ to be the
(Type of government-issued photo ID provided)

above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

_____ My commission expires on: _____
(Notary signature) (Date)