RELEASE OF INFORMATION AUTHORIZATION

Revised 8/3/2015

901 S. National Avenue • Springfield, MO 65897



Student Name:			BearPass #: M
LAST	FIRST	MI	
U.S.C. § 1232g ("FERPA") and FERP exceptions, the University does no the student's written authorization	A's implementing reg t disclose a student's n. Students may sign t e the students' record	ulations, 34 C.F educational rec his Release of Ir	lucational Rights and Privacy Act, 20 .R. § 99.1, et seq. Subject to certain ords and information to others without information Authorization Form to on subject to the law, applicable policies,
Information about the University's www.missouristate.edu/registrar/lthroughout campus, and therefore office.	<u>FERPA.html</u> . I recogniz	ze that records	•
By signing this form, I hereby requon office(s) of Missouri State Universitand/or organizations listed below.	est that the ty provide the records	and/or inform	ation described below to the individuals
Information to be released:			
-			
For the following purpose:			
This authorization may be revoked person(s) and/or office(s) to whom remain in effect according to the ti	n you deliver this auth	orization. Abse	written revocation to the same nt such revocation, this authorization will
This authorization will be revoked	(please select only on	e option below)):
☐ Immediately after the specific information requested above has been released, or			
O Four years after the date listed	below, or		
On (please list date)			_
*The student must sign this form	in front of a University o niversity reserves the rig	fficial or provide	a valid acknowledgement duly executed student to authenticate the student's
Student Signature:			Date:
Processed By			Date