FERPA WAIVER FORM

Authorization to Release Academic, Financial and Student Life Information

Waiver of Privacy Rights Granted by the Family Educational Rights and Privacy Act of 1974 (FERPA/Buckley Amendment)

As a participant in Federally-funded loan and grant programs, Olivet College is required to follow the guidelines contained in the Family Educational Rights and Privacy Act (FERPA), U.S. Code 20 USC §1232g, commonly known as the “Buckley Amendment.” This statute mandates that we safeguard and protect the privacy and confidentiality of all student records. It prohibits any discussion of matters related to enrollment and attendance at the College with anyone other than the student except by written consent of the student.

This form is provided as a means for you to give the College permission to discuss your financial, academic and student life records, verbally or through written communication, with your parents or legal guardians. If you wish to grant this permission, please complete, sign, and return this form to Student Services, Mott 205, Olivet College, Olivet, Michigan 49076.

Your written consent will be kept permanently on file, and the College will then be allowed to release information regarding your student records and account to those persons who have been designated per this FERPA Waiver Form. If for any reason you subsequently decide to cancel the release, please submit a letter withdrawing the consent, indicate the person(s) affected, and send or deliver the written notice to the Director of Student Services, Mott 205, Olivet College, Olivet, Michigan 49076.

It is not necessary to complete and submit this form to release financial information if you provide another individual with a parent PIN to access your financial account information on myOlivet. However, myOlivet access does NOT authorize guests to receive verbal or written information about student financial, academic, or student life records. For individuals to be authorized to receive this information, this FERPA Waiver Form would need to be completed and signed by you.

I hereby authorize Olivet College to release academic, financial and student life information as discussed above.

Student’s Name (printed): _____________________________________ ID#: _______________________

Student’s Signature: __________________________________________ Date: _______________________

6/13/2012