



FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT ("FERPA")

RECORDS RELEASE FORM

I hereby give Nassau Community College ("NCC") this written consent to release my grades, transcripts, GPA information, information regarding my academic progress,

 fill in additional informational information, if any, that you consent to being disclosed

to _____, _____
 Name(s) Relationship of named individual(s) to Student

Upon the above-named person(s)' request, to keep the above-named person(s) apprised of my educational progress at NCC. This written consent shall be valid for the entire period during which I will be enrolled at Nassau Community College, unless otherwise indicated below:

 fill in a specific time period during which the Record Release will stay in effect

I understand that this consent remains in effect for the time period stated above, unless revoked by me, in writing, the written revocation to be delivered to the Nassau Community College but that any such revocation shall not affect disclosures previously made by NCC prior to receipt of my revocation.

PRINT NAME OF STUDENT

DATE

SIGNATURE OF STUDENT

NCC Identification Number
To be filled in by Nassau Community College

The parties acknowledge and agree that this document may be executed by electronic signature which shall be considered as an original signature for all purposes and shall have the same force and effect as an original signature. Without limitation, "electronic signature" shall include electronically scanned and transmitted versions (e.g. via pdf) of an original signature. "Electronic signature" shall also include the typing of signatory name on the signature line.