

Student Records Consent to Release Information Form

This **Student Records Consent** to Release Information Form Sample provides a clear template for authorizing the release of a student's academic and personal data to third parties. It ensures compliance with privacy regulations while facilitating smooth communication between educational institutions and authorized individuals. Using this form helps protect student confidentiality and streamline information requests.

Student Information

Full Name:

Student ID Number:

Date of Birth:

Consent Details

Name of Person/Organization to Receive the Information:

Purpose of Release:

Specific Information to be Released (e.g., transcripts, grades, enrollment status):

Authorization

I hereby authorize the release of the above-specified information from my student record as indicated. I understand that this consent is voluntary and may be revoked by me at any time in writing.

Date:

Signature of Student:

If student is under 18, signature of Parent/Guardian:

Please return this completed form to the school's Registrar's Office or appropriate department.