



Request to Release Information

Information must be printed or typed in black or blue ink. (Penciled forms will not be accepted.)

According to the Family Educational Rights and Privacy Act (FERPA), college students are considered responsible adults and are allowed to determine who will receive information about their educational records.

In order to release information to a third party, a written request must be submitted to Student Services.

All fields are required.

Student Name: _____
Last First Middle

Student ID number: _____

Last 4 digits of SSN & Full DOB (Only use if Student ID is unknown): _____

What are you requesting?

___ Unofficial ECC Transcript

___ Enrollment Verification for Term: _____
Year/Semester

___ Other (please specify): _____

Release Information To:

Name of Third Party: _____
Last First Middle

Fax Number: _____

Mailing Address: _____
Street City State Zip

Email: _____

I affirm that I am the student named above. In compliance with FERPA, I hereby give my written consent and authorize East Central College to release my record as noted.

Student's Signature: _____ **Date:** _____

SIGNATURE WILL BE VERIFIED