

STUDENT CONSENT FORM



Troy University, in accordance with the Federal Family Educational Rights and Privacy Act (FERPA), seeks to assure the highest levels of confidentiality regarding student records and information. Student information will not be disclosed to a third party without the written consent of the student, unless directed by law.

As a student, you are eligible to designate a parent, guardian, or spouse to whom appropriate information can be released. By granting consent, you also grant the designee, access to your *Trojan Web Express* account.

AUTHORIZATION TO RELEASE INFORMATION

I, _____, am/will be a student at Troy University.
Print Name of Student

I hereby provide written authorization, as required under 20 USC 1232g (the Federal Family Education Rights and Privacy Act), and any similar state law, for Troy University to release all appropriate information and records to the designated third party listed below:

| PERSON TO WHOM INFORMATION IS TO BE RELEASED | RELATIONSHIP TO YOU |
|--|---------------------|
| | |

Signature of Student

Date

Student ID Number

NOTE TO THE DESIGNATED THIRD PARTY: *Most of the information you will have questions about related to a student account will be answered on Self-Service. In order to access this information you will need the student's login and password. This should be provided by the student to you. Regarding all telephone or email inquiries for information, you will be asked to provide the student identification number before any information will be released.*

NO RELEASE OF INFORMATION

Students not granting consent for the release of information and/or records must sign below.

I do not provide authorization to release information and records to a third party.

Signature of Student

Date

Student ID Number