



FERPA RELEASE FORM

The Family Educational Rights and Privacy Act of 1974 (FERPA) is a federal law that protects the privacy of student’s educational records. FERPA affords eligible students certain rights with respect to their educational records. An ‘eligible student’ under FERPA is a student who is 18 years or older or who attends a postsecondary institution at any age, therefore The Learning Bridge Career Institute (LBCI) considers an ‘eligible student’ any student who is currently attending LBCI or has attended the Institute. FERPA does not apply to applicants who have been admitted, but who have not been in attendance. In respecting the students’ specific, protected rights regarding the release of their education records.

The purpose of this form is to provide a written consent for LBCI to release certain education records, as required by FERPA.

I, _____ Student Social Security Number# _____,

Authorize **The Learning Bridge Career Institute** to release my educational records described below to the following person (s) or agency:

Full Name: _____ **Relationship** _____

- Academic Transcript Full Academic Record Student Account Records
- Attendance Records Financial Aid Records Cancel Previous Release
- Employment related opportunities or verification Medical Reasons Other _____

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Release over the phone:

LBCI will not release information over the phone, unless the person is listed on the release form provides the following pin: _____ (three-digit number). Once this pin has been established it can only be changed by the student in person at LBCI and completing a new FERPA form.

Academic Hold: _____ (Initial Here)

I would like to place my educational record on Academic Hold denying anyone access to my educational records.

I understand that the information marked for release may be released orally, in writing or in the form of copies of records, at LBCI’s description. I also understand that this authorization will remain in effect until my written canceled notification is made by submitting a new FERPA Release form to the Administrative Offices.

Student Signature: _____

Date: _____