

**FERPA Release Form**  
**The Family Educational Rights and Privacy Act**



**Richland College**  
 DALLAS COUNTY COMMUNITY COLLEGE DISTRICT

Last

First

MI

DCCCD ID#

Mailing Address:

Street and No. or P.O. Box

City, State & Zip

Telephone No.

Email:

This authorization is valid until canceled. Student may cancel the release at any time by submitting another FRPA form. The release is valid until designated end date. Beginning Date:  End Date:

**I give Richland College permission to release selected items below.**

Student Signature:  Date:

**AUTHORIZATION TO RELEASE EDUCATION INFORMATION**

*(A separate form is required for each area)*

- All Records**
- Accounting** – Includes tuition and fee balances, financial holds, mailing and billing address, payment plan, accounting statement, collection information and debt information.
- Admissions** – Includes dates of application, program selected, documents received, documents pending date of admission, admission status and conditions of admission.
- Registration** – Includes current enrollment, dates of enrollment activity, enrollment status, residency status, semester attending and mailing address information.
- Academic Records** – Includes courses taken, grades received, GPA, academic process, honors, transfer credit award and degrees awarded.
- Financial Aid** – Includes all financial aid information.
- Letter of Recommendation**

**PLEASE PRINT CLEARLY**

**(P=Parent, G=Guardian, S=Spouse, O=Other)**

Release to  Relationship (Circle One) P G S O  
 Name

Release to  Relationship (Circle One) P G S O  
 Name

Release to  Relationship (Circle One) P G S O  
 Name

Cancel   
 Date of Cancellation

Cancel   
 Date of Cancellation

Cancel   
 Date of Cancellation

Release method:  **Mail**  **Fax**  **Pick Up**

<b>PICTURE ID REQUIRED WITH THIS FORM</b>	Verified by: <input type="text"/>	Date: <input type="text"/>
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