

Western Iowa Tech Community College

Request to Release Information

Student ID:*

Last

Name:*

First

Name:*

SSN:*

The Family Educational Rights and Privacy Act (FERPA) requires Western Iowa Tech Community College (WITCC) to release non-directory information only to the student. The student may, however, voluntarily waive privacy rights and authorize certain individuals to receive the non-directory information. By completing this form, the individuals named below will have the ability to obtain information regarding the student.

I hereby waive my rights under FERPA, and I hereby authorize WITCC to release any information concerning my enrollment at WITCC to the following persons: (list first and last names of all individuals authorized to obtain this information)

This information may include: (check all that apply):

All academic information and grades

Attendance information

Financial aid information

All financial activity

This information is requested on the date hereof and for all terms of enrollment at WITCC unless it is rescinded in writing.

Only certain information will be released over the phone.
All requests for transcripts or grades will need to be made in writing.