Western Iowa Tech Community College

Access to Student Information Consent Form

Full Name of Student: (please print)	Student ID #:
_____	_____

Access to Information

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.

Education Record: schedule of classes, courses taken, academic progress, degrees awarded, and attendance information.

Financial Record: grants, loans, financial aid documents, statements and billing.

In order to request access to FERPA protected information, the following identity screening protocols will be required:

In-person requests-	Phone requests-	Email Requests-
Show valid/current state/government issued ID as proof of record ownership	Provide specific identifying information (Name, DOB, most recent address, etc.)	Responses will only be provided when requested via the current email account listed on the on the student record.

Consent Form (must be completed by the student):

I hereby waive my rights under FERPA, and authorize WITCC to release the following information to the person(s) listed:

(**Please select all that apply**)

☐ **My Education Records**- schedule of classes, courses taken, academic progress, degrees awarded, and attendance information.

☐ **My Grade Records**- grades received.

☐ **My Financial Records**- including grants, loans, financial aid documents, statements and billing.

☐ **All Records-** includes all items of information as detailed above.

☐ **Specific Request-** (please list) _____

Please provide the below information for each authorized person. *This information is requested on the date hereof and for all terms of enrollment at WITCC unless it is rescinded in writing.*

First Name	Last Name	Relationship

_____	_____	_____
Student Signature	Phone	Date

Education Record:
Records & Registration Office
studentrecords@witcc.edu
712-274-6404

Financial Record:
Financial Aid Office
finaid@witcc.edu
712-274-6402

Western Iowa Tech Community College
Registrar Office
4647 Stone Ave; PO Box 5199
Sioux City, IA 51102