EDMONDS COLLEGE
20000 68th Ave W, Lynnwood, WA 98036

Student Release of Records - FERPA Authorization Form

(Family Educational Rights and Privacy Act)

Student Name _____ _____ _____
Last (Surname) **First** **Middle**

ctcLink ID Number ☐☐☐☐☐☐☐☐☐☐ **Birthdate** ☐☐-☐☐-☐☐☐☐ MM-DD-YYYY

→ TO BE FILLED OUT BY THE STUDENT ONLY! ←

I hereby authorize Edmonds College to release my educational records, as indicated below, for the purpose of:

☐ Academic Assistance ☐ Payment of Tuition ☐ Verification of Enrollment/Progress

☐ Other: _____
(If 'other', please explain why you wish to release these records)

***Initial** on the lines below to indicate which records you wish to make available:*

_____ **All Financial Aid Records** (records include: status of file, award and disbursement of funds information, Satisfactory Academic Progress status, income information, and any other information contained in the application or financial aid file).

_____ **All Academic/Transcript Records** (records include: transcripts, admission and registration information, schedule information, assessment test scores, Satisfactory Academic Progress status, residency information, and any other documentation contained in the academic records).

_____ **All Student Financial Account Records** (records include: amounts due for tuition and fees, sources of payment for tuition and fees, refund information, records hold information as it relates to parking tickets, library fines, financial aid repayments and any other accounts receivable information contained in student account records).

_____ **Instructor/Classroom Records** (records include: attendance, progress reports, test and homework scores if available. Please note: instructors are not required to take attendance or provide progress reports, and retain only those records which make up the final grade. FERPA pertains to the release of records. Instructors are not required to have conversations about academic progress with anyone other than the student).

_____ **Other** (Please Specify) _____

Please Note: Counseling Center and Services for Students with Disabilities records are considered medical records and are not covered under FERPA rules. A separate release form must be obtained from these departments.

The following individual(s) are authorized to access the information indicated above (PLEASE PRINT FULL NAME)

Spouse _____ Mother/Stepmother _____

Agency _____ Father/Stepfather _____

Other (Specify name and relationship) _____

Although I understand I am not required to release this information, I am giving my consent to Edmonds College to disclose these records. I also understand that this release remains in effect for one calendar year from the date signed, unless I revoke my consent in writing and deliver it to the Enrollment Services office at Edmonds College.

☐ ***PLEASE NOTE: A clear photocopy of your picture ID is required to verify authenticity of this release. Enrollment Services can make a copy if you deliver this form in person. Otherwise, please make sure a copy is attached before turning this form in.***

SSN # ☐☐☐☐☐☐☐☐☐ Signature of Student _____ Date _____

(These records are stored in a data system which uses the SSN as system identifiers. SSN# is strongly recommended.)

FERPA pertains to the release of records only. It does not give others the right to act on your behalf or to change your records.

Email this form *and* photo ID to registration@edmonds.edu or you may submit both in-person or via mail to Enrollment Services. Upon request, confirmation of this release will be sent to the appropriate campus offices.

Nondiscrimination Statement: Edmonds College does not discriminate on the basis of race; color; national origin; sex; disability; age; religion; sexual orientation; citizenship, marital, or veteran status; or genetic information in its programs and activities. The following person has been designated to handle inquiries regarding nondiscrimination policies: Kathy Smith (Title IX and Section 504 Coordinator/Investigator); Clearview Building, Room 122B; kathy.smith@edmonds.edu, 425.640.1814.

Rev. 10/29/2026