



OFFICE OF STUDENT AFFAIRS & ENROLLMENT MANAGEMENT

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<http://www.lunet.edu/studentaffairs/index.html>

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STUDENT RELEASE FOR PARENTAL ACCESS TO EDUCATIONAL RECORDS

Family Educational Rights and Privacy Act (FERPA)

Langston University makes every effort to comply with the Family Educational Rights and Privacy Act of 1974 (Buckley Amendment). This Act is designated to protect the privacy of the student's educational records, to establish the student's right to review and inspect his/her records, and to provide guidelines for the correction of inaccurate information through informal and formal hearings. The policy permits disclosure of educational records under certain limited circumstances and routine disclosure, at the university's discretion, of information referred to as directory information: name, local address, phone number, major, participation in sports, current and past class schedule, height, weight, degrees, honors, and major dates of attendance, and previous colleges attended.

- This release **PERMITS** discussion of my educational records with University officials with the individuals listed below.
 - Academic Records: grades, GPA, demographic, registration, academic standing, enrollment/registration, class schedule, degree audit
 - Financial Aid Information: awards, application data, disbursements, eligibility, financial aid satisfactory academic progress status
 - Bursar: billing Information: statements, charges, payments, past due amounts, collection activity, etc.
 - Disciplinary records: behavior, conduct.
- This release **does NOT permit** the individuals below to request official documents, make changes to my records, or otherwise conduct educational business on my behalf (ex: order transcripts, drop/add classes).
- This release is in effect until I revoke it in writing.**

Understanding my privacy rights under FERPA, I consent to grant access to my educational records to the individuals listed below as follows:

Parent / Legal Guardian's Information

Name: _____

Relationship to student: _____

Date of Birth: _____

Address: _____

Phone #: _____

Parent / Legal Guardian's Information

Name: _____

Relationship to student: _____

Date of Birth: _____

Address: _____

Phone #: _____

Please RETURN completed form, IN PERSON ONLY, to the Office of the Registrar, Page Hall, Room 134

Student Name: _____
Please print

Student ID: _____

Student Signature: _____

Date: _____

TYPE OF PHOTO ID PRESENTED: Driver's License LU Student ID Passport

LANGSTON UNIVERSITY OFFICE STAFF USE ONLY

Office Staff Signature: _____

Date: _____