



Privacy of Student Records

In this day and age, privacy of personal information is paramount on the minds of many private citizens. Palm Beach State takes the protection of the student and their records VERY seriously and, therefore, will follow the law in order to serve the student's best interest.

The Family Educational Rights and Privacy Act of 1974 (FERPA) allows the release of "Directory Information" without the student's prior consent. This includes dates of attendance, major field of study, weight and height of members of athletic teams, degrees and awards received, and educational institutions attended. **A student may request that ALL information be considered private and therefore not released to anyone by submitting a non-disclosure form via Workday.**

With regard to parental access to a student's file: *The Guidelines for Postsecondary Institutions for Implementation of the Family Educational Rights and Privacy Act of 1974 as Amended-Revised Edition 1995* states: "At the postsecondary level, parents have no inherent rights to inspect a student's education records. The right to inspect is limited solely to the student." Records **MAY** be released only through express written permission by the student or in compliance with a subpoena.

If a parent, guardian, spouse, or other person wishes to gain access to a student's records by obtaining written request, they may use the form provided below.

Photo identification must be provided by any person requesting access to a student's records.

Palm Beach State College RELEASE OF INFORMATION FORM

I, _____, Student ID _____, request that any and all information in my student record be released to _____ (*photo ID required*). I understand that **this release is only valid for one use** and must be resubmitted should anyone need access to my records again. You may reach me at (*daytime phone number*) _____ if you require additional information. When I attended Palm Beach State, my name was _____.
(print previous name if different from above)

Student's Signature (*required*): _____ Date: _____

Student signature WILL be compared to the signature contained in the student's file.

For Office Use Only

This student's records were accessed by _____ (*Relationship to Student*)
on the ____ day of _____ 20____.
Print Name

Signature of Recipient

Student's signature and Recipient's credentials verified by _____
PBSC Staff Initials