



**Authorization to Release Information  
To Merced Community College  
3600 M Street, Merced, CA 95348-2898**

**FERPA Release Form**

Student ID#	First Name	Middle Initial	Last Name
Permanent Street Address		City	State Zip Code

In accordance with the Family Education Rights and Privacy Act of 1974 (FERPA), the undersigned student herein permits the below named program and/or educational institution to disclose the educational information specified below to the Merced College Rising Scholars program designee:

Organization/Program/School

Name	Contact #	Email
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Organization/Program/School

Name	Contact #	Email
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Box(es) marked below indicate the records/information the above undersigned student permits the organization, program and or education institution to release to Merced Community College Rising Scholar's designee:

**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 of financial aid file.)

**All Academic/Transcript Records** (records include: transcripts, class grades per semester, admissions and registration information, schedule documentation contained in the academic record.)

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

Other (Please specify) \_\_\_\_\_

I understand that:

- (1) I have the right to not consent to release of my educational records
- (2) I have the right to revoke this consent at any time by delivering a written revocation to Merced Community College and the organizations listed above
- (3) The information release can be oral or in the form of copies of written records, as preferred by the Rising Scholars Designee or allowed by the institutions mentioned above.

I consent to the disclosure of any personally identifiable information from my education records to the above named organization/program/educational institution, for reasons determined by Merced Community College's Rising Scholars program as appropriate. This authorization will remain in effect for one year from the date of signing.

Student Signature	Date
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