



Office of Student Conduct and
Community Standards
Suite 745 Steger Student Life Center
P.O. Box 210193
Cincinnati, OH 45221-0193

Phone (513) 556-6814
Fax (513) 556-1458

Family Educational Rights and Privacy Act Release of Information Form

Student Contact Information	
Date: _____	Phone #: _____
Name: _____	M #: _____
E-Mail: _____	

Family Education Rights and Privacy Act

The 1974 Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of a student's educational record. FERPA applies to all educational institutions receiving funds from the United States Department of Education, from kindergarten through university level. Under FERPA, the Office of Student Conduct & Community Standards may not share the contents of a student's Student Conduct File with anyone other than the student without written consent to do so. Exceptions to FERPA include a health and/or safety emergency, or an educational need to know.

Recipient(s) of the Information:	
Name: <u>Tricia Yee</u>	Relationship: <u>PLME Coordinator</u>
E-Mail: <u>tricia.yee@uc.edu</u>	Phone #: <u>513-556-6236</u>
Name: _____	Relationship: _____
E-Mail: _____	Phone #: _____
Name: _____	Relationship: _____
E-Mail: _____	Phone #: _____

Information Release Options

Please release the following information to the individual(s) listed above:

- Contents of the Entire Student Conduct File
- Contents of Individual Cases(s) From Incident(s) Occurring on: _____
- Other: _____

Please release the information specified to the recipient(s) listed above in the following manner:

- Oral Discussion (with or without the student present)
- Personal Access to the Case File (with or without the student present)
- In-Person During Meetings with the Office of Student Conduct and Community Standards
- All of the Above

Student Responsibilities & Consent for Disclosure

I understand the following:

- By signing this form, I am giving consent to the Office of Student Conduct & Community Standards to release the information specified above to the individual(s) listed on this form in the manner

specified above.

I may revoke this consent, in writing, at any time except to the extent that action has already been taken upon this release.

I will not be contacted after an inquiry is made or information is released to the individual(s) listed on this form.

By signing below, I am voluntarily giving my consent to the Office of Student Conduct & Community Standards to disclose the information indicated above to the individuals listed above.

Student Signature

Date