

Towson University Department of Music

**Student Authorization to Discuss Educational Issues
FERPA Release Form**

The Family Educational Rights and Privacy Act (FERPA) bars the release of educational information to parents, guardians, or third parties without the written consent of the student.

Student's Name: _____
(last name) (first name) (M.I.)

Student ID Number: _____ Phone Number: _____

Student E-mail: _____

Person(s) or organization(s) to whom or to which educational information may be discussed:

Primary Name/Organization : _____
(last name) (first name)

Phone Number: _____ E-mail: _____

Relationship to the Student: _____

Secondary Name/Organization : _____
(last name) (first name)

Phone Number: _____ E-mail: _____

Relationship to the Student: _____

Purpose or purposes for disclosure of educational information: (Include in this section any information which you, the student, give permission to be discussed. i.e. academics, financial information, student health and well-being, other [specify]. Only those items listed will be discussed with the persons(s) or organization(s) listed above.)

I hereby give my consent and grant authorization to Towson University to discuss educational issues as specified above to the party or parties named above.

Student's Printed Name: _____

Student's Signature: _____ Date: _____