



**REVOCATION OF FERPA RELEASE FORM**

The Family Educational Rights and Privacy Act (FERPA) establishes certain rights for students regarding the privacy of their educational record. While parents/guardians/spouses/ and others may have an interest in the student's record, access to or release of the educational record is only by written student consent. Students may choose to complete and submit this "Revocation of FERPA Release Form" to the Office of the Registrar to remove individuals from having access of their educational record.

I, \_\_\_\_\_ (Please print full name), the undersigned, authorize [INSERT COLLEGE NAME], part of the Maricopa County Community College District, to revoke the following educational records FERPA Release:

**Person to be removed: (PLEASE PRINT)**

Name: \_\_\_\_\_ Organization (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_

I acknowledge by my signature the above named person will no longer have access to information on my academic record.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

Student ID \_\_\_\_\_