



Office of the Dean of Students  
P.O. Box 8500  
Lynchburg, TN 37352

FERPA RELEASE AUTHORIZATION FORM

In compliance with the Federal Family Educational Rights and Privacy Act (FERPA) of 1974 and the Tennessee Board of Regents Policy on Access and Release of Student Education Records, Motlow is prohibited from providing certain information from your student records to a third party.

You may, at your discretion, grant Motlow permission to release information about your student records to a third party by submitting a completed FERPA Release Authorization Form. This form allows students to authorize the release of confidential academic, financial aid and student financial account information, academic progress reports and grades to a third party. The specified information will be made available only if requested by the authorized third party. The College does not automatically send information to a third party. Submit your completed form to the Dean of Students office.

This release applies to the timeframe in which a student is continuously enrolled. Any lapse in enrollment status will require a new form. This FERPA release is revocable by the student at any time. If a student wishing to retract permissions granted on this form, please send a written request to the Dean of Students office, or contact at 931-393-1690 or [kmoss@mscc.edu](mailto:kmoss@mscc.edu)."

This form allows third parties to access student record information from any Motlow campus. NOTE: This release overrides all FERPA directory suppression information that you have set up in your student record.

**A. Student Information**

_____ NAME (Last, First, Middle Initial)	_____ STUDENT ID NUMBER	_____ FERPA CODE*
_____ CURRENT ADDRESS	_____ DAYTIME PHONE NUMBER	

**B. Third-party Designee(s)**

_____ NAME (Last, First, Middle Initial)	_____ Relation to student	_____ FERPA CODE*
_____ NAME (Last, First, Middle Initial)	_____ Relation to student	_____ FERPA CODE*
_____ NAME (Last, First, Middle Initial)	_____ Relation to student	_____ FERPA CODE*

\*Student must create a code for each person. When requesting information, the student ID number and the applicable FERPA Code must be known by the student or the third party designee.

**C. Authorization to Release Confidential Information**

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

Mail this form (do not fax) to:  
Dean of Students Office  
Moore County Campus  
P.O. Box 8500  
Lynchburg, TN 37352