



FERPA Release Form

This form has been provided to students who wish to allow their parent(s)/legal guardian or a designated person access to information relating to the student's academic record at Missouri Western State University. **Information may only be released with identification to the person(s) listed below, or by written letter (mail or fax) to the Registrar's Office.** The Registrar's Office **will not** disclose any specific grade information, GPA or specific course information over the telephone. **This form expires when the student is no longer currently enrolled (excluding the summer term).**

Please submit this form to the Registrar's Office, Eder Hall 102, (816) 271-4229 (fax).

I give my consent to disclose any documents or information pertaining to my academic records to the authorized individual(s) listed below:

Student's Full Name (Please Print) _____

Signature (student) _____ Date _____

Student's G Number _____

Name _____
(Parent/Legal Guardian)

Address _____
(Street Address) City State Zip

Telephone Number _____

Name _____

Address _____
(Street Address) City State Zip

Telephone Number _____