

I, _____, hereby give consent to the University of New Mexico to release records and other information covered by the Family Rights and Privacy act of 1974 (FERPA). I understand that by signing this form my records and financial information can be released without my knowledge to the individuals listed below.

Student Signature

UNM ID #

Start Date

End Date

The person(s) listed below have access to records and information maintained by the offices listed below.

- Office of the Registrar - Academic Transcripts, Enrollment Certificates
- Dean of Students - FERPA Authorized Disciplinary Information
- Bursars Office - Student Financial Information
- Housing Office - Account and Assignment Information
- Admissions - Admission Status, Documents Related to Admission, Residency Status of New Students
- Academic Advising - Information Related to Advising Sessions, Progress Toward a Degree, Course Selection, and Application for a Degree Program or For Graduation
- Financial Aid Office -
 - The Status of my Financial Aid File My Financial Aid Awards
 - All documentation in my file Other (must be specified below)

The information maintained by the selected offices may be released to the following person(s)

Printed Name

Relationship to Student

Printed Name

Relationship to Student

If form is not presented in person to the office of the Registrar, Records and Registration (SSC RM 250), with a valid state or federally issued picture ID, this form MUST BE NOTARIZED in the space below.

For Official Use Only.

Received by: _____

Date: _____

Type of ID: _____

Entered by: _____

Entered by: _____