



In compliance with the Department of Education’s Family Educational Rights and Privacy Act (FERPA), Weber State University is prohibited from providing certain information from a student’s educational record to a third party (e.g. parent, spouse, etc) without the student’s explicit written consent. This release form serves as a written consent enabling our students to designate a third party to gain access to specific information. If the student wishes to revoke the authorization, he/she must provide a signed written statement (Section F of this form) to the Registrar’s Office.

Additionally, to protect the student’s information from unauthorized individuals, Weber State University requires the student to provide a unique identifier that will allow the designated third party to access information and services over the telephone. The unique identifier should be something that is easily remembered, but something that is confidentially shared between the student and the third party. This identifier will remain valid unless authorization is revoked or if a new request is received.

Please provide a copy of this form to the third party designee and submit the original to Weber State University’s Registrar’s Office, 1102 University Circle, Ogden UT 84408-1102 or fax to 801-626-6679. In order to receive services, the third party designee will need to present a copy of the form in person, in writing, or use the designee identifier via telephone.

Section A. WSU Student Information	
Name (last, first, middle initial)	W-Number
Current Mailing Address (street, apartment number, city state, and ZIP code)	Daytime Phone Number ()
Section B. Third Party Designee (e.g. parent, spouse, etc)	
Name (last, first, middle initial)	
Address (street, apartment number, city state, and ZIP code)	Daytime Phone Number ()
Relation to Student	E-mail Address
Section C. Designee Identifier	
If the identifier is forgotten, Weber State University will require the student to submit this form with a new identifier. This is designed to protect our student’s personal information from unauthorized access.	Identifier (6-20 characters)
Section D. Authorization to Access	
<input type="checkbox"/>	All Admission Records (including: application information, residency, and any other documentation contained in the admissions records).
<input type="checkbox"/>	All Student Records maintained by the Registrar’s Office (including: transcripts, registration information, schedule information, academic standing, and any other documentation contained in the academic records).
<input type="checkbox"/>	All Financial Aid Records maintained by the Financial Aid Office.
<input type="checkbox"/>	All Scholarship Records maintained by the Scholarship Office.
Section E. Certification	
By signing and submitting this request, the student certifies that he/she is granting Weber State University permission to release information designated in Section D to the designated party listed in Section B.	
Student’s Signature	Date
Section F. Revocation	
I hereby revoke the above third party, named in section B, access to the above indicated student record and/or account information.	
Student’s Signature	Date