

**SOUTH PLAINS COLLEGE  
AUTHORIZATION TO RELEASE STUDENT INFORMATION**

Student Name: (Please Print): \_\_\_\_\_ South Plains College Student ID: \_\_\_\_\_

The financial and non-directory educational record information on your student account is confidential and protected by the Family Educational Rights & Privacy Act (FERPA). FERPA is also known as the Buckley Amendment, Statute 20 U.S.C. 1232 (g), regulations 34 CFR Part 99. We cannot release certain information to another person without your written authorization. This form will allow appropriate offices to release specific information about you to the person(s) you designate below.

**I authorize South Plains College representatives to release information regarding my account as indicated below:**

Student Information Type	Make Selection	Description (Including, but <u>not</u> limited to, the following):	
Business Account	B	<ul style="list-style-type: none"> <li>Account balance, charges, and credits</li> <li>Past due balances</li> <li>Refunds</li> </ul>	<ul style="list-style-type: none"> <li>Third party sponsorship</li> <li>1098T</li> </ul>
Financial Aid	F	<ul style="list-style-type: none"> <li>Financial aid application</li> <li>Loans</li> <li>Verification information</li> </ul>	<ul style="list-style-type: none"> <li>Award information</li> <li>Veteran's benefits</li> </ul>
Academic Records	A	<ul style="list-style-type: none"> <li>Student enrollment</li> <li>Attendance</li> </ul>	<ul style="list-style-type: none"> <li>Academic records                             <ul style="list-style-type: none"> <li>a. Grades</li> <li>b. Schedule</li> </ul> </li> </ul>
Student Housing	H	<ul style="list-style-type: none"> <li>Housing assignments</li> <li>Housing balances (Charges &amp; Credits)</li> </ul>	<ul style="list-style-type: none"> <li>Past due balances</li> <li>Housing refunds</li> </ul>
Other	O	<ul style="list-style-type: none"> <li>Please Describe:</li> </ul>	

**Please list each person you wish to have access to the above information on your account. This form does not authorize any third party to access a student's online account.**

<input type="checkbox"/> B <input type="checkbox"/> F <input type="checkbox"/> A <input type="checkbox"/> H <input type="checkbox"/> O		
<b>Name:</b>	<b>Last 4 digits of SSN:</b>	<b>Mo./Yr. of Birth:</b>
<input type="checkbox"/> B <input type="checkbox"/> F <input type="checkbox"/> A <input type="checkbox"/> H <input type="checkbox"/> O		
<b>Name:</b>	<b>Last 4 digits of SSN:</b>	<b>Mo./Yr. of Birth:</b>

**I understand this authorization will remain in effect until I submit a written request to the Admissions and Records Office (contact info below) to cancel this authorization.**

This form should be signed in the presence of any SPC official, or submitted from your SPC student email account.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*If you prefer to fax or mail the form, you must sign the form in the presence of a Notary Public:**

State of Texas  
County of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_ by \_\_\_\_\_

Personalized Seal) \_\_\_\_\_

Notary Public's Signature

<b>Deliver by mail to:</b> South Plains College 1401 S College Ave, Box C Levelland TX 79336	<b>Deliver in person to:</b> Admissions & Record – Levelland Campus or the Lubbock, Plainview or Reese Center Fax – (806) 897-3167	<b>Request will be in effect until rescinded by student:</b> Cancellation Date: _____ Student Signature: _____
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Admissions & Records Office Use Only

Received By: \_\_\_\_\_ Date: \_\_\_\_\_ Processed By: \_\_\_\_\_ Date: \_\_\_\_\_