

## CONSENT TO RELEASE STUDENT EDUCATIONAL RECORDS

**Instructions:** This form is to be completed by the student to request the release educational records.

**Please Print:**

Student full legal name												
<i>Last Name</i>	<i>First Name</i>	<i>Middle Name</i>										
CSU ID number												
<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>												
Student's address												
<i>Street</i>	<i>City</i>	<i>State/Zip Code</i>										

I, the undersigned, hereby authorize Chicago State University to release the following educational records and information: ***(Identify records or types of records below)***

- Grades
  Tuition Account
  Financial aid awards/documents  
 Academic progress/status
  Other: \_\_\_\_\_

These records should be released to the following person/agency (Identify name and address of person/agency to receive information):

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These records are being released for the purpose stated below:

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I understand that I have the right not to consent to the release of my educational records; and that this consent shall remain in effect until revoked by me, in writing, and delivered to the Chicago State University Office of Records and Registration, but that any such revocation shall not affect disclosures previously made by Chicago State University prior to the receipt of any such written revocation.

Student's Signature: \_\_\_\_\_  
\*Signature required – request will not be processed if omitted.

Submit to: **Registrar's Office** – Cook Administration Building Room 128  
 Chicago State University  
 9501 South King Drive  
 Chicago, IL 60628

**OFFICE USE ONLY** Stamp Date Received

**ID Provided:**

- |  |   |
|--|---|
| <input type="checkbox"/> Chicago State University Cougar UID | <input type="checkbox"/> Driver's License |
| <input type="checkbox"/> State ID                            | <input type="checkbox"/> Passport         |

\_\_\_\_\_  
Staff Initial

\_\_\_\_\_  
Date Received