2023-2024 Consent to Release Information for: Disability Resource Center

_____	_____		_____	_____
Last Name	First Name	MI	Palomar ID Number	Date of Birth

The Family Educational Rights and Privacy Act (FERPA) is federal legislation that requires student confidentiality. FERPA requires that student personal information, such as social security numbers, birthdates, financial and academic records may not be disclosed to anyone other than the student without the student's expressed written permission. This permission is required of **all** students, even if the student is under the age of 18. To ensure compliance with FERPA, all inquiries for specific disability or Disability Resource Center information that pertains to a student, require identification by the student and any other individual wishing to obtain access. **This form *must* be submitted by the student to ensure proper identity, and must be renewed *every* academic year.**

A. Consent to Release

I, (please print student name) _____, do hereby consent to have information regarding my records in the Palomar College Disability Resource Center, for the 2023-2024 academic year, discussed with and/or released to:

Name (Please print)	Relationship to Student	Specific information to be released or shared

*Check **all** that apply:* ☐ Schedule Appointments ☐ Discuss DRC Records

B. Request to Rescind

I, (please print student name) _____, do hereby request that my previous Consent to Release Information Form be rescinded and that person(s) previously listed no longer have information regarding my records in the Palomar College Disability Resource Center for the 2023-2024 academic year.

C. Certification

Signing this form certifies that the information reported is complete and correct and that any false statement or failure to provide proof when asked may be cause for delay or denial of information sharing by the Palomar College Disability Resource Center. **Warning: forgery or purposely giving false and/or misleading information may be cause for a fine, sentence to jail or both.**

_____ _____

Student Signature Date

Submit this worksheet to the Palomar College DRC Office. You should make a copy of this form for your records.