

Request to Restrict Release of Return completed form in person to the			
Name:	Student ID/	Student ID/SSN:	
Address:	Phone Num	ber:	
	FERPA Policy		
enrolled or who have ever beer records, amend mistakes on the	n enrolled. This act ensures that stuer record, and limit disclosure of in	974) and covers students who are currently dents are given the right to inspect their information from those records. Information bry information" and includes items such	
Full name of student	Email address(es)	Dates of attendance	
Address(es)	Major and field(s) of study	School or division of enrollment	
Telephone number(s)	Degrees and awards	Enrollment status	
Name of institution last attended	Participation in official activities and sports	Photograph(s)	
data for public information, par form below. You have the opti	rents, etc. If you do not want this in on to rescind this request later on it will not be able to release any info	oyers, schools, those gathering statistical information to be shared, please sign this f you wish. Confidential status will be formation about you. Please consider the	
person with a picture ID every able to remotely request a trans	time you wish to discuss or receive	ome to Augusta Technical College in e copies of your records. You will not be formation to third parties such as potential	
A face-to-face interview is reunderstand the implications	quired before this request will go of confidential status.	into effect to ensure that you	
about your education and this f		it is their legal right to request information ance. This form also does not cover	
	udent Records at Augusta Technical C g my ID in person to the Student Reco	College withhold the release of the above stated ords staff.	
Q:	ъ.		