## Carnegie Mellon University

## University Registrar's Office

University Registrar's Office Phone: 412-268-8186 CMURegistrar@andrew.cmu.edu www.cmu.edu/hub

This form should be used on a case-by-case basis - not as a general release of ALL a student's records (ie. parent wants student's grade report for Fall 2014). This form should be submitted by the student each time a parent wants access to a specific record at a specific time. This form does not give a parent access to Student Information Online (SIO).

## Consent to Release Information to Parent or Family Member

Pursuant to the Family Educational Rights and Privacy Act of 1974, students should use this form to allow information or documents relating to academic standing, actions, appeals, personal information, etc. to be released to a family member. Please fill out this form, sign and date. Return this form to The HUB, Warner Hall, Lower Level.

Student Andrew ID:		
Student Name:	rst and/or Preferred, MI	
CONSENT TO RELEASE INFORMA	ATION	
I,Student's Name	hereby authorize Carnegie Mellon Univ	versity and those acting on its behalf, to release
toFamily Member Name	(	) the information or documents listed below,
which relate to my academic standing as a studer		
may be deemed to be personally identifiable in	nformation from my student education record	s pursuant to the Family Educational Rights and
Privacy Act of 1974 or may otherwise be prote	ected under other applicable laws.	
INFORMATION TO BE RELEASED		
Grade report for (specify semester):		
Unofficial academic record		
Student tax forms and W2's		
Statement of Student Account for (spec	cify year): Fiscal year	Past fiscal year
SIGNATURE & MAILING INFORMA	TION	
Student Signature:		Date:
This information will be delivered to recipient via	a U.S. Postal Service. It will not be e-mailed or	mm/dd/yyyy faxed.
Family Member Name:		
Recipient Mailing Address:		
	Street Address	
	City, State, Zip, Country (if not US)	