



FERPA Release Form

Permission to Release Education Record Information Office of the Registrar

Student ID #:	
I(print name)	give permission to WJC to release my
to	
for (purpose)	·
This release form is good for continu	ous enrollment at WJC for completing my educational goal.
Cell phone number:	
Personal email:	
I have read and understand the infor	mation that I am releasing.
 Signature	 Date