

Release of Student Information Form

This form is to be used for purposes of the Harpur Academic Advising Office only.

Under the provisions of the Family Education Rights and Privacy Act (FERPA), I authorize the Harpur Academic Advising Office to release and/or discuss the following records (select all that apply):

Binghamton University Academic Records
 Other (please specify): _____

*Name of individual with **permission to release** information (if applicable):* _____

*Name, address & telephone number of office or person(s) who has **permission to receive** information:*

I am authorizing the Harpur Academic Advising Office to discuss the above information with the person(s) named above for the purpose of (Please select one of the following):

Informational purposes
 Transferring to another institution
 Other (please specify): _____

Printed Name of Student (Last, First, M.I.)

Student Signature

B-Number

Binghamton University E-mail Address

Date Release Signed

Date Release Expires (optional)

Please return completed form to:
Harpur College Academic Advising, OH-110
Binghamton University, P.O. Box 6000
Binghamton, NY 13902-6000
Phone: (607) 777-6305
harpuradvising@binghamton.edu