UNIVERSITY *of* ALASKA SOUTHEAST

EDUCATION RECORD INFORMATION RELEASE

JUNEAU CAMPUS
REGISTRAR'S OFFICE
11066 AUKE LAKE WAY
JUNEAU, AK 99801
TEL: (907) 796-6100
FAX: (907) 796-6365
uas.registrar@alaska.edu

KETCHIKAN CAMPUS
STUDENT SERVICES
2600 7TH AVE.
KETCHIKAN, AK 99901
TEL: (907) 225-6177
FAX: (907) 225-3624
ketch.info@alaska.edu

SITKA CAMPUS
STUDENT SERVICES
1332 SEWARD AVE.
SITKA, AK 99835
TEL: (907) 747-6653
FAX: (800) 478-3552
sitka.registrations@uas.alaska.edu

One form must be completed for each recipient

Requested by (Student):

last name first name middle initial

student ID#

date

I give permission to the University of Alaska Southeast to release the selected items below to the recipient listed.

✖

student signature

Release to:

last name first name middle initial

relationship

address

city state zip

email phone number

☐ **STUDENT ACCOUNTS/CASHIER'S OFFICE**
Includes records related to a student's payment or billing summary.

☐ **ADMISSIONS**
Includes records related to a student's admission status at UAS.

☐ **ACADEMIC RECORDS**
Includes records related to a student's academic history.

☐ **REGISTRATION**
Includes records related to current and past enrollment at UAS.

☐ **STUDENT AFFAIRS RECORDS**
Includes records related to student housing and residence life files, student judicial files and conduct issues, organizational membership and participation, and behavioral health issues (to exclude counseling and health center files).

☐ **DISABILITY/ACCESSIBILITY RECORDS**
Includes records related to disability accommodations and documentation maintained by Disability/Accessibility Services

PHOTO ID:

Please show government issued ID or include photocopy.

This authorization is valid until a written request to rescind is received by UAS enrollment services.

Students only need to complete one FERPA release form and it will be recognized across the University of Alaska system.

Reason or purpose of this release is: _____

Office Use Only

ID type: Verified by: Date:

PS 03/26