

Permission to Release Information FERPA (Family Educational Rights and Privacy Act)

Student Name (please print)

LBC Student ID or SSN

I authorize the disclosure and release of my education record(s) at Lancaster Bible College to the following person(s). I understand the person(s) may access this information via phone, email, mail or in person. Further, I understand that this authorization remains in effect until revoked in writing by me.

CHECK ONE:

- All records** (This includes grades, course schedule, financial aid, student account information, etc.)
- Academic Records Only** (This includes grades, course schedules, GPA, etc.)
- Financial Records Only*** (This includes Financial Aid and Student Account information.)

Name

Relationship to Student

Address

Email/Phone

Name

Relationship to Student

Address

Email/Phone

Student Signature

Date

**There are times when other people contact the Solution Center LBC to help pay a school bill, such as a grandparent, church or step-parent. If you want to release your student account information to others you know want to help and is NOT named above, please complete this section.*

I authorize the disclosure and release of my **Financial Records Only** at Lancaster Bible College **to the following person(s) for the purposes of helping me pay my school bill.** I understand the person(s) may access this information via phone, email, mail or in person. Further, I understand that this authorization remains in effect until revoked in writing by me.

Name

Relationship to Student

Name

Relationship to Student

Student Signature

Date

Please submit this form to The Solution Center, Lancaster Bible College, 901 Eden Road, Lancaster, PA 17601. For more information about your FERPA rights, contact the Registrar's Office at 717-560-8254 or go to:
https://www.lbc.edu/Assets/PDFs/About/lbc_student_consumer_ferpa.pdf