



Director of Campus Life

229.931.2377 OFFICE

229.931.2835 FAX

800 Georgia Southwestern State University Drive
Americus, Georgia 31709-4379

GRADE RELEASE FORM

The Family Educational Rights and Privacy Act of 1974 prohibits the release of personally identifiable information from student's educational records without their prior written authorization. Exceptions to this policy are limited to: (1) release of such information to a specific list of officials with a legitimate educational interest in the record, (2) the release of such information in response to a court order, health or safety emergency, or approved research project, or (3) the release of public directory information which has not been previously restricted by the student.

Name (First, Last, Middle Initial): _____

GSW ID: _____ Organization of Interest _____

I have expressed interest in the organization mentioned above and hereby consent to the release of the following information to the indicated offices:

Records to be disclosed: Semester grade point average, cumulative grade point average, semester hours/credits enrolled, permanent address and phone number, race/ethnicity, and other records deemed appropriate by the Office of Sorority & Fraternity Affairs.

Parties to whom the records may be disclosed: Chapter President, Chapter Advisor, Membership Intake Coordinator/New Member Educator, (Inter) National Headquarters Staff, Alumni Support Staff, the Division of Student Affairs

Purpose of disclosure: For use in chapter scholarship and general statistics, educational programming, award recognition, and verification of minimum academic standards and University enrollment.

Length of Disclosure: This authorization shall remain in effect as long as I remain an aspirant/member of the organization and am enrolled at the Georgia Southwestern State University.

Student's Name (print) Student's signature Date