

BYU Registration Office

Missionary Student Information Release Form



Registration Office, B-130 ASB
 Brigham Young University
 Telephone: (801) 422-2824 Fax: (801) 422-0615

STUDENT INFORMATION

Name (Last, First, Middle)		Student ID Number		Telephone Number	
Home Address		City	State	Zip Code	
Mission			Mission Dates		
Email					

In compliance with the Department Of Education's Family Educational Rights and Privacy Act (FERPA), the Registration Office is prohibited from providing certain information from a student's educational record to a third party without the student's explicit written consent. The specified information will be made available only if requested by an authorized party.

In order to protect the student's information from unauthorized third parties, the Registration Office requires the student to provide a unique identifier that will allow a designated third party to access the student's information. The identifier should be easily remembered and kept confidential between the student and the third party.

<p><i>Third party designee</i></p> <p>Name: _____</p> <p>Relationship with student: _____</p> <p>The above person has authorization to:</p> <p><input type="checkbox"/> Request my Net ID password be reset</p> <p><input type="checkbox"/> Other _____</p>	<p><i>Designee Identifier</i></p> <p>_____</p> <p>(range from six to ten characters)</p> <p>In the event the student forgets the identifier, the Registration Office will require the student to submit this form with a new identifier. This requirement is designed to protect the identity of the student from unauthorized persons.</p>
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By signing and submitting this request, the student certifies that s/he is granting the Registration Office permission to release the information to the designated party.

Furthermore, the student acknowledges that the release form and the identifier is valid until _____, or until the student submits a new release form to the Registration Office. If the student wishes to ^{Date}revoke the authorization before that date s/he must provide a signed statement to the Registration Office.

(Student's Signature)
(Date)

Once this form is filled out please turn into the Registration Office before you leave on your mission.

Contact Information:
 Brigham Young University
 Registration Office
 B-130 ASB
 Provo, UT 84602
 Telephone: (801) 422-2824
 Fax: (801) 422-0615

Student's Name

Middle

First

Last