

Barry University

Office of the Registrar

11300 NE 2nd Avenue, Miami, FL 33161

Phone: 305.899.3860 * Fax: 305.899.3946 * Email: registrar@barry.edu

AUTHORIZATION FOR RELEASE OF STUDENT INFORMATION (FERPA)

Completed forms may be submitted to the Office of the Registrar in person at Adrian Rm. 108, or may be signed, scanned and emailed from the requestor's BARRY EMAIL. Faxed and Non-Barry Email submissions will be verified by phone using student's phone number on file.

First, MI, Last Name

Student ID# (Required)

Under the Family Educational Rights and Privacy Act (FERPA), Barry University is permitted to disclose information from your education records to your parents if your parents (or one of your parents) claim you as a dependent for federal tax purposes. The term "parent" includes natural parent, guardian, or individual acting as a parent in the absence of a natural parent or guardian. Please indicate whether your parents claim you as a tax dependent.

Please check the appropriate box:

Yes. I certify that my parents **claim me as a dependent** for federal income tax purposes.

Name of Parent/Guardian

Relationship to Student

Parent/Guardian Email Address

No. I certify that my parents **do not claim me as a dependent** for federal income tax purposes.

I am NOT claimed as a dependent for federal income tax purposes, but I agree that Barry University may disclose information from my educational and financial records to the person(s) I designate below:

Name of Parent/Guardian/Spouse/Other

Relationship to Student

Designee Email Address

Name of Parent/Guardian/Spouse/Other

Relationship to Student

Designee Email Address

No. I certify that my parents do not claim me as a dependent for federal income tax purposes. **I do not wish to release my educational or financial records to anyone at this time.** I understand that Barry University will NOT be able to provide any financial or educational information to anyone but myself.

I have read and understand the above and I recognize that consent or non-consent as established in this document shall remain in effect until revoked by me in writing.

Signature

(must print and sign prior to submitting)

Date