

Release of Confidential Student Record Information



UNIVERSITY of
DENVER

OFFICE OF THE REGISTRAR

In accordance with the Family Education Rights and Privacy Act of 1974 (as amended), the University of Denver does not release student's educational record information without the written consent of the student, except to certain categories of persons or organizations specifically exempt by the law. A student's consent is not required to release information to school officials; to federal, state, and local authorities involving an audit or evaluation of compliance with educational programs; in connection with financial aid; to organizations conducting studies for or on behalf of DU; to accrediting organizations; to parents of a dependent student; to comply with a judicial order or subpoena; in a health or safety emergency; or the results of a disciplinary hearing to an alleged victim of a crime of violence.

Please use this form to request release of educational records. List the records you wish to release, the exact name of the party or parties to which the information is to be released, and purpose of release. Indicate how long the release should be in effect. ***Use a transcript request form for academic transcripts.***

I authorize the University of Denver to release the educational records specified below. Unless specified otherwise, this authorization is active for one academic year.

*Name of Recipient: _____

Mailing Address: _____

City, State, Zip Code: _____

*Record(s) to Release _____

*Duration of Release: _____

*Purpose of Release: _____

*Student Name: _____

*DU ID Number: _____

Mailing Address: _____

City, State, Zip Code: _____

*Student Signature: _____ *Date: _____

****Required information – this form cannot be processed if required information is missing.***

Return completed form to the Office of the Registrar, University of Denver, 2197 S. University Blvd, University Hall G033 or fax to 303.871.4300. You may also save information in the form and email it to registrar@du.edu. Your typed name will constitute a signature for emailed forms. Questions about this policy and procedure may be directed to the Office of the Registrar at 303.871.3897.

Office Use Only:

Action taken _____ By: _____ Date: _____