BOSSIER PARISH COMMUNITY COLLEGE
STUDENT INFORMATION RELEASE FORM

I, ____________________________________________, ___________________________
Student Name Campus Identification Number

hereby give my permission to discuss or disclose information from my personal records regarding the following:

☐ Grades ☐ Transcripts
☐ Financial aid ☐ Attendance
☐ Discipline records ☐ Other

These records may be disclosed by the following means:

☐ In Person ☐ By Fax
☐ By Phone ☐ By Email

☐ ☐ ☐ ☐ ☐ ☐
Family Educational Rights and Privacy Act (FERPA) Code
*Without a FERPA Code, no information will be released by phone, email, or fax.

Please release the information indicated above to the following:

__________________________________  ____________________________________
Name Relationship to Student

__________________________________  ________________________________
Student Signature Date

__________________________________  ________________________________
Received By Date

**Please return this form to the Office of Vice Chancellor for Student Services in A220 upon completion.

Bossier Parish Community College does not discriminate on the basis of race, color, national origin, gender, age, religion, qualified disability, marital status, veteran’s status, or sexual orientation in admission to its programs, services, or activities, in access to them, in treatment of individuals, or in any aspect of its operations. Bossier Parish Community College does not discriminate in its hiring or employment practices.