Office of the Registrar

Release Form: Family Educational Rights and Privacy Act of 1974 (FERPA)

Annually MCPHS informs students of the Family Rights and Privacy Act of 1974 (FERPA), as amended and that it fully complies with the various provisions. This Act was designated to protect the privacy of educational records, to establish the rights of students to inspect and review educational records, and to provide guidelines for the correction of inaccurate or misleading data through informal and formal hearings. Students also have the right to file complaints with the Family Policy Compliance Office concerning alleged failure by the institution to comply with the Act. Questions can be referred to the Office of the Registrar.

Institutions may disclose information on a student without violating FERPA if it has designated the information as “directory information”. At MCPHS, this includes:

- Student name
- Gender
- Student ID
- Local address
- Permanent address
- University email address
- Major and minor field(s) of study, including the division or program in which a student is enrolled
- Classification as a freshman, sophomore, junior, senior, or graduate, or by number referring to such classes
- Course load—full time or part time
- Participation in officially recognized activities
- Dates of attendance and graduation, and degrees received
- Most recent previous educational institution attended
- Honors and awards received, including selection to a dean’s list or an honorary organization
- New England School of Acupuncture Clinical Internship Schedule

Other information is designated as restricted. In most cases such records will not be released to a third party without written release from the student specifying which records are to be released, and to whom.

Authorization to Disclose Academic Information

With regard to parental access: The Guidelines for Postsecondary Institutions for Implementation of the Family Educational Rights and Privacy Act of 1974 as Amended-Revised Edition 1995 states: “At the postsecondary level, parents have no inherent rights to inspect a student’s education records. The right to inspect is limited solely to the student.” Records may be released only through express written permission by the student or in compliance with a subpoena.

Please sign below and return to the Office of the Registrar if you consent for College officials acting on behalf of MCPHS to release to your parents (or other named individuals) your educational records.
My signature authorizes MCPHS to release information about me during the period I am enrolled. This includes my academic status, classroom conduct, course attendance, grades and other necessary academic information for the sole purpose of assisting me in my efforts to be academically successful. I understand that I have the right to terminate this authorization at any time by providing written notice to the Registrar.

Print Student Name: ____________________________________________________________________________________

Student ID Number or SSN: ____________________________________________________________________________________

Student Signature: ______________________________________________________________________________________

Date: __________________________ Phone Number: __________________________

Student's email address: ____________________________________________________________________________________

Major: ________________________________________________________________________________________________

If parents live at the same address, please list them in #1.

☐ Check this box if person(s) named below are not your parent(s).

1. Name: ______________________________________________________________________________________________

Address: ______________________________________________________________________________________________

City, State, Zip: _________________________________________________________________________________________

Phone Number: ________________________________________________________________________________________

Email: ________________________________________________________________________________________________

2. Name: ______________________________________________________________________________________________

Address: ______________________________________________________________________________________________

City, State, Zip: _________________________________________________________________________________________

Phone #: ______________________________________________________________________________________________

Email: ________________________________________________________________________________________________