



Scholarship Office

California State University, Fresno

5150 N. Maple Avenue M/S JA64

Fresno, CA 93740

Phone: 559-278-6572

Fax: 559-278-5303

<http://studentaffairs.csufresno.edu/scholarships>

FERPA Written Consent

Last Name: _____ First Name: _____

Phone: _____ Date: _____ Student ID: _____

Address: _____

City/State/Zip: _____

“Statute: FERPA provides that an agency or institution may not have a policy or practice of disclosing personally identifiable information from education records without the “written consent” of the parent or eligible student...” Federal Register-Family Educations Rights and Privacy Act 20 U.S.C 1232g(b)(1).

Party to whom the disclosure may be made:

Name: _____ Relationship: _____

Address: _____ Phone: _____

City/State/Zip: _____

Records to be disclosed:

Purpose of the disclosure:

Signature of party providing consent: _____ Date: _____

Please return this form to: California State University, Fresno
Scholarship Office
5150 N. Maple Avenue M/S JA64
Fresno, CA 93740