



Authorization of Information

Please print legibly and complete in ink

In accordance with the Federal Family Educational Rights and Privacy Act of 1994, all information regarding a student's records are considered private between the student and Texas Bible College (TBC). Therefore, parents or guardians cannot obtain information about your performance from TBC, because TBC cannot legally release such information. In accordance with these laws, we require a written release for discussion of this information with a third party. For various reasons, you may wish to waive this protection and permit release of some or all types of information to certain people.

Legal Name: _____ Last 4 SSN Digits: _____

I do not wish to waive my rights to privacy. Please do not release my information or records to any individual.

My information and records may be released according to the instructions below:

Name of Individual	Relationship	Academic Records	Financial Records	Disciplinary Records
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In the event that TBC needs to contact my Pastor, or my Pastor should contact TBC to discuss my records, I hereby give permission to disclose the following information:

Pastor's Name: _____

Academic Records

Financial Records

Disciplinary Records

As specifically instructed above, I hereby authorize TBC to release information contained in my records, both in printed and electronic form. This authorization expires when I leave TBC, when I indicate otherwise or when I submit a new authorization form at the beginning of each school year.

Student Signature: _____ Date: _____

PLEASE RETURN THIS FORM TO:

The Office of the Registrar * Texas Bible College * 3900 College Drive, Lufkin TX 75901

NOTES:

1. This form does not apply to medical or psychological records in accordance with HIPPA regulations. You must contact TBC or health services to obtain the necessary form for release of medical information.
2. If you want to change or revoke this information at any time, you must inform the Registrar's Office in writing for your request to be valid.