



ACADEMIC RECORDS
Student Information Release
Authorization

Return the completed form to:

Academic Records Office
Bunker Hill Community College
250 New Rutherford Avenue, B204
Boston, MA 02129

In compliance with the federal Family Educational Rights and Privacy Act of 1974, the College is prohibited from disclosing certain information in your education record, such as grades, billing, tuition and fees assessments, financial aid (including scholarships, grants, work-study, or loan amounts) to a third party without your prior consent.

You may, at your discretion, grant the College permission to release information from your education records to a third party by submitting a completed Student Information Release Authorization form. You must complete a separate form for each third party to whom you wish to grant access to your education record information.

Submit your completed form to the Academic Records Office at BHCC, at the address above. Please note that your authorization to release information will expire one academic year from submission of the completed form (e.g., September 2014- August 2015). You may renew or revoke your authorization at any time by sending a written request to the address above.

This information release authorization is intended for use only by the Academic Records Office.

Student Information:

Student Last Name Student First name Middle Initial

Current Address (Street/PO, Apt) City State Zip Code

Third Party Designee:

Organization Name First and Last Name

Current Address (Street/PO, Apt) City State Zip Code

Email Address Daytime Phone Extension

Education record information to be release: (Check one or more circles below to grant authorization)

- Official or unofficial college transcript
Billing statements, charges, credits, payments, past due amounts, and/or collection activity
Financial aid awards, application data, disbursements, eligibility, and/or financial aid satisfactory academic progress
Access to student records maintained by the Academic Records Office, Student Payment, and Financial Aid, including all of the above examples
Other, please specify:

BHCC ID:

Student Signature:

Date: