

The Family Educational Rights and Privacy Act of 1974 (FERPA) prohibits the release of personally identifiable information from students' educational records without their prior written authorization. Exceptions to this policy are limited to: (1) release of such information to a specific list of officials with a legitimate educational interest in the record, (2) the release of such information in response to a court order, health or safety emergency, or approved research project, or (3) the release of public directory information which has not been previously restricted by the student.

As a student at Delta State University who is a member, or interested in becoming a member, of a Greek letter organization I hereby consent to the release of the following information to the indicated offices:

Records to be disclosed:	High School grade point average, other institution of higher education grade point average(s), Delta State University semester grade point average, cumulative grade point average, semester hours/credits enrolled, suspension or academic probation standing.
Parties to whom the records may be disclosed:	Chapter President, Chapter Advisor, Recruitment Chair/New Member Educator, Academic Chair, Honorary Societies, (Inter)National Headquarters Staff, Office of Student Life.
Purpose of Disclosure:	For use in chapter scholarship and general statistics, educational programming, award recognition, and verification of minimum academic standards and University enrollment.
Length of Disclosure:	This authorization shall remain in effect for the duration of the student's active college career/Greek organization membership

I, \_\_\_\_\_ understand that the Family Education Rights and Privacy Act of 1974 allows the release of my scholastic record only with my consent. I give my consent to release the records outlined above to the Office of Student Life for educational purposes in determining my eligibility for membership in a Greek organization. Furthermore, should I be deemed eligible for membership, I understand these records will be released to the designated parties of each organization for which I am eligible to join for evaluation and recruitment purposes by the Greek organization(s). Should I join a Greek organization, I understand these records will be released to the organization at the mid-term and conclusion of each semester of this release. I understand that I am not required to give this consent. I understand that this releases my grades for the use of grade reports during my membership to my Greek organization. I want Delta State University to share this information as instructed above and I give this consent of my own free will. I understand at any point I may withdraw this authorization by providing written notice to the Office of Student Life.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Witness: Office of Student Life Personnel*

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\_\_\_\_\_  
*Student ID Number*

\_\_\_\_\_  
*Title*

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*Date*

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*Date*