



**NEW YORK CITY COLLEGE OF TECHNOLOGY**  
*The City University of New York*  
 300 Jay Street  
 Brooklyn, NY 11201

**FERPA WAIVER**  
**Education Information**

The Family Educational Rights and Privacy Act of 1974 (“FERPA” or the “Act”) establishes the privacy rights of students (parents if the student is under 18) with regard to educational records. The act makes provision for inspection, review and amendment of educational records by the student and requires, in most instances, prior consent from the student for disclosure of such records to third parties. The consent must be in writing, signed and dated by the student and must specify records to be released, the reason for the release, and the names of the parties to whom such records will be released. The act applies to all persons formerly and currently enrolled at an educational institution. No exclusion is made for non-U.S. citizen students. However, the act does not apply to a person who has applied for admission, but who never actually enrolled in or attended the institution, and deceased persons.

I hereby give permission for New York City College of Technology (NYCCT) to provide information concerning my academic record to the person(s) identified below. This form must be completed in order for NYCCT to comply with the request. **Note: this Consent does not cover medical records held solely by Student Health Services or the Counseling Center – contact those offices for consent forms.**

STUDENT INFORMATION

PERSON(S) TO WHOM INFORMATION MAY BE RELEASED

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Street Address

\_\_\_\_\_  
 Relationship to Student

\_\_\_\_\_  
 City/State/Zip Code

\_\_\_\_\_  
 Street Address

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

\_\_\_\_\_  
 City/State/Zip Code

\_\_\_\_\_  
 Student ID

\_\_\_\_\_  
 Telephone

\_\_\_\_\_  
 Date

**Specify records:**

\_\_\_\_\_

\_\_\_\_\_

**Waiver will be in effect until rescinded by student**

**Return in Person\***

Office of the Registrar  
 New York City College of Technology  
 300 Jay Street, Room NG-15  
 Brooklyn, NY 11201

OR Brooklyn Educational Opportunity Center  
 111 Livingston Street  
 Brooklyn, New York 11201

OR Continuing Ed Division  
 Howard Building 4<sup>th</sup> Fl

**\*This form may be faxed to 718-254-8532 if a current photo-ID is attached. Acceptable photo-IDs include Drivers' Licenses or your NYCCT Student ID Card.**