

Academy for Nursing and Health Occupations

FERPA NOTICE OF RIGHTS AND STUDENT AUTHORIZATION

Part A — Annual Notification of Rights Under FERPA

The Family Educational Rights and Privacy Act (FERPA) affords eligible students certain rights regarding their education records. At a postsecondary institution, these rights belong to the student regardless of age.

1. Inspect and review records

Students have the right to inspect and review their education records within 45 days after ANHO receives a request. Submit a written request identifying the records to the Registrar. ANHO will arrange access and notify the student of the time and place for inspection.

2. Request amendment

Students may request amendment of records believed to be inaccurate, misleading, or otherwise in violation of their privacy rights under FERPA. Submit a written request to the Registrar identifying the portion to be amended and the reason. If ANHO denies the request, it will notify the student of the decision and the right to a hearing, along with the applicable procedures.

3. Consent to disclosure

Students have the right to provide written consent before ANHO discloses personally identifiable information from education records, except when FERPA permits disclosure without consent.

4. File a complaint

Students have the right to file a complaint alleging a FERPA violation with the U.S. Department of Education, Student Privacy Policy Office, 400 Maryland Avenue SW, Washington, DC 20202. See studentprivacy.ed.gov for current information.

Disclosures Without Prior Consent

FERPA permits certain disclosures without student consent, subject to applicable conditions. Examples include disclosures to school officials with legitimate educational interests; officials of another school in which the student seeks or intends to enroll (or is enrolled), subject to applicable requirements; appropriate parties for financial aid administration; authorized auditors and education authorities; accrediting organizations; and appropriate parties in a qualifying health or safety emergency. Other exceptions are listed in 34 CFR § 99.31.

A school official may include ANHO employees, trustees, and qualifying contractors or service providers performing institutional functions under ANHO's direct control concerning education records. A legitimate educational interest exists when access is needed to fulfill professional responsibilities.

Directory information may be disclosed without consent only if ANHO has properly designated it and provided the required notice and opportunity to opt out. This form itself does not designate directory information. ANHO must separately maintain and distribute its applicable directory-information notice, if any.

ANHO will maintain records of disclosures when required by FERPA. This notice is provided as part of ANHO's annual FERPA notification process.

Acknowledgment of Receipt

I acknowledge that I received or was provided access to ANHO's FERPA Notice of Rights. My acknowledgment does not authorize release of education records to another person.

Student printed name: _____

Student signature: _____ Date: _____

Part B — Optional FERPA Authorization to Release Information

Complete this section only if you want ANHO to discuss or disclose specified education records with the people you name. This authorization is voluntary.

Student full name: _____

1. Records Authorized for Disclosure

Check each category you authorize ANHO to disclose (unchecked categories are not authorized):

- ☐ Academic records, grades, attendance, academic progress and advising
- ☐ Financial aid eligibility, awards, requirements and status
- ☐ Tuition, fees, payments and student account balances
- ☐ Admissions, enrollment and registration information
- ☐ Student conduct and disciplinary records
- ☐ Other specific records (describe): _____

2. Purpose of Disclosure

I authorize disclosure of the selected information for the purpose of assisting me with my education, academic progress, enrollment, financial aid, or student account matters, as applicable to the categories selected above.

3. Authorized Recipients

I authorize ANHO to disclose the selected information to the following individuals (full names required):

1. Full name: _____
Relationship: _____ Phone (optional): _____
2. Full name: _____
Relationship: _____ Phone (optional): _____
3. Full name: _____
Relationship: _____ Phone (optional): _____

4. Duration and Revocation

This authorization remains effective until I revoke it in writing or until the following expiration date (if specified): _____. I may revoke this consent at any time by submitting a signed written request to the Registrar. Revocation does not affect disclosures already made in reliance on this authorization.

ANHO will take reasonable steps to verify the identity of a person requesting information. ANHO may decline disclosure when identity or authorization cannot be verified. This consent does not require ANHO to disclose every requested record.

5. Student Consent

By signing below, I voluntarily authorize ANHO to disclose the records identified above to the recipients identified above for the stated purpose.

Student signature: _____ Date: _____

Student printed name: _____