

**RELEASE OF  
THE FAMILY EDUCATION RIGHTS AND PRIVACY ACT (FERPA)**

I, \_\_\_\_\_, an (applicant)(candidate) for \_\_\_\_\_(position) in  
\_\_\_\_\_ (organization)(program) have read the notice to students  
regarding my privacy rights as stated in <http://hilo.hawaii.edu/registrar/ferpa.php>.

I agree that information regarding my GPA, registration and disciplinary status can be  
released to Campus Center officials for the purpose of verifying my eligibility to  
participate in the above organization or program.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date