

CAPITOL TECHNOLOGY UNIVERSITY STUDENT CONSENT TO RELEASE OF EDUCATION RECORDS

In compliance with the Federal Family Education Rights and Privacy Act of 1974, Capitol Technology University is prohibited from providing certain information from your student records to third parties (including your parents, your spouse, or a sponsor). You may grant the university permission to release information contained in your student records to a third party by completing this form and submitting it to the Office of Registration and Records at 11301 Springfield Road, Laurel, Maryland 20708. This authorization is valid until canceled in writing.

Student Information:

Last Name	First Name	Student ID #
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Contact Number	Email Address
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I give Capitol Technology University permission to release the following categories of information (check those that apply):

Check	Name	Description
	All Records	ALL records maintained by Capitol Technology University
	Accounting	Includes billing statements, charges, credits, payments, loan distribution, past due amounts, collection activity, and communication history
	Registration	Includes current enrollment, dates of enrollment activity, enrollment status, residency status, semesters attended and mailing address information
	Academic Records	Includes courses taken, grades received, GPA, academic progress, honors, transfer credit awarded and degree(s) awarded
	Financial Aid	Includes all general financial aid information
	Admissions	Includes dates of application, programs selected, documents received, documents pending, dates of admission, admission status and conditions of admission
	Career Services	Includes records maintained by the Career Services Department
	Residence Life	Includes information regarding a student's university living accommodations
	Placement Testing & Tutoring	Includes Information regarding the results of placement testing and the use and progress of tutoring services.
	Student Conduct Records	Includes the results of the Conduct Review Process and any resulting reports or information
	Disabled Students Services	Includes information regarding disability documentation and requested accommodations

Cancel Previous Release	<u>Describe the particular release(s) you wish to cancel or state "All Prior Releases:"</u>
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Capitol Technology University may release the categories of information selected above to the following individuals:

Name	Address	Relationship	Purpose (i.e., providing access to parents, scholarship/employment)

Student Signature

Date