The intent and purpose of this joint FERPA Release Form is to allow a two-way flow of information regarding a student’s academic records from the University of Alaska Fairbanks and the University of Guam with staff and faculty at both schools.

I give permission for the University of Alaska Fairbanks (UAF) and the University of Guam (UoG) to freely exchange the student data specified above.

I authorize full access to my student records for all semesters/terms that I am enrolled unless explicitly revoked by me in writing, or until the following date: ________________

Authorization

Student Signature __________________________ Date ________________

ID Type __________________________ Office use only

Verified By: __________________________ Date ________________