

**Student Reference Request (FERPA Release and Release of Liability)**

Student name: \_\_\_\_\_ Student ID number: \_\_\_\_\_  
(please print)

I request \_\_\_\_\_ to serve as a reference for me.

The purpose(s) of the reference are: (check all applicable spaces)

- application for employment
- all forms of scholarship or honorary award
- admission to another education institution

The reference may be given in the following form(s): (check one or both spaces)

- written
- oral

I authorize the above named person to provide an evaluation of any aspect of my academic performance, whether based on personal observation or on my education records at Austin Community College, and to release information from my education records, including my grades, GPA, class rank, any information pertaining to my education at other institutions I have previously attended, and any other personally identifiable information. I authorize release of this information and reference or evaluation to: (check all applicable spaces)

- all prospective employers OR
- specific employers (**list name and address on reverse side**)
- all educational institutions to which I seek admission OR
- specific educational institutions (**list name and address on reverse side**)
- all organizations considering me for an award or scholarship OR
- specific organizations (**list name and address on reverse side**)

I understand that under the Family Educational and Rights and Privacy Act, 20 USC 1232g: (1) I have the right not to consent to the release of my education records; (2) I have the right to receive of copy of any written reference upon request; and (3) I may, but am not required to, waive my right of access to confidential references given for any of the purposes listed above.

I waive my right of access to references given by the above named person.

I do not waive my right of access to references given by the above-named person.

This consent shall remain in effect until revoked by me, in writing, and delivered to the above named person, but any such revocation shall not affect disclosures made prior to the person's receipt of my written revocation.

I release ACC, its employees and the person(s) providing the above described reference or evaluation from all claims and liability for damages that may result from their compliance with this request.

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

\_\_\_\_\_  
Date