DUAL CREDIT PERMISSION FORM

PERMISSION TO DISCLOSE INFORMATION

In an effort to comply with the Family Educational Rights and Privacy ACT (FERPA), Bluegrass Community and Technical College (BCTC) strives to protect individuals' rights to privacy by limiting the transferability of records without consent. However, the following parties/entities may obtain individual records without written consent.

- School officials with a legitimate educational interest.
- Other schools to which a student may be transferring.
- Specified officials for audit or evaluation purposes.
- Appropriate parties in connection with financial aid to a student.
- Organizations conducting certain studies on behalf of the school.
- Accrediting organizations.

Date

• Appropriate officials in cases of health and safety emergencies.

It is noted that BCTC may disclose directory information without consent. This consists of information such as name, address, telephone number, date of birth, dates of attendance, etc. A student may officially request that directory information be withheld by completing a form in the Admissions/Records office located in the Anderson Technical Building.

It should also be noted that parents, regardless of their financial obligation, are not privy to their child's records without this signed release unless their child is under 18 years old. I, (print student name) _____ ____, do hereby give BCTC permission to disclose my educational records and directory information for the purpose of employment, judicial matters, credential verification, parental requests, and any other reasons not covered above. Student Signature: Date: I understand that I can revoke this permission by submitting a written request to the Admissions/Records office. Please allow at least 48 hours for processing. ☐ Unrestricted access to records ☐ Specify the following individuals ONLY may have access to my educational records: PERMISSION TO ENROLL IN DUAL CREDIT COURSEWORK As an educational entity, we are required by the federal Family Educational Rights & Privacy Act (FERPA) law to have parent/quardian permission for a student to participate in dual credit if the student is under 18 years of age. I, (print parent/guardian name) _____ understand the FERPA information presented above. I give permission for my child to participate in dual credit offerings. **Parent Signature** Student Signature

Date