

# Registrar's Office Release of Academic Information to Parents



Office of the Registrar  
100 Institute Road, Worcester, MA 01609  
Ph: (508)-831-5211  
Fax: (508)-831-5931

STUDENT'S FULL NAME: \_\_\_\_\_

STUDENT ID#: \_\_\_\_\_

### **Parent Certification:**

Under the Provisions of FERPA, I understand that I have the right to review and inspect the educational records of my dependent as defined in Section 152 of the Internal Revenue Code.

In accordance with the above provision, I certify that the student whose name appears below is my dependent.

Print Student's Legal Name	Parent/Guardian's Signature	Relationship
----------------------------	-----------------------------	--------------

### **Student Authorization to Release Student Academic Information to Parents:**

I understand that under the provisions of FERPA, and with my written consent, I have the right to authorize WPI to release information contained in my educational records to a parent or guardian who may claim me as a dependent for Federal Income Tax purposes.

Student's Signature	Student ID#	Date
---------------------	-------------	------

This authorization by the parent and student will remain in effect as long as the student is in continuous enrollment at WPI. Should the student's dependency status change during his or her enrollment period, it shall be the responsibility of the student to notify the Registrar's Office in writing of their change of status.

### **RETURN THIS COMPLETED FORM TO:**

Registrar's Office  
100 Institute Road  
Worcester, MA 01609