

Request to Rescind Permission Release Education Record Information

I hereby request that the Office of the Registrar at Purdue University Fort Wayne rescind the permission to release education record information on file for the recipient listed below. In accordance with FERPA, Purdue Fort Wayne no longer has my permission to disclose information from the education record to this recipient.

Requested By (Student):

Release To (Recipient):

LAST NAME

FIRST NAME

LAST NAME

FIRST NAME

STUDENT IDENTIFICATION NUMBER

ORGANIZATION/ SCHOOL

RELATIONSHIP TO RECIPIENT

ADDRESS

CITY, STATE, ZIP

STUDENT SIGNATURE

DATE

OFFICE USE ONLY

Action taken: SPACMNT Updated

Password/Passphrase Removed

DATE

SIGNATURE