

FERPA Consent to Release Educational Records and Information

This release represents your written consent to permit the University of North Texas at Dallas to disclose educational records and any information contained therein to the specific individual(s) identified below.

Please read this document carefully and fill in all blanks.

Phone Number:

I am a candidate at the University of North Texas at Dallas Teacher Education Program and hereby give my voluntary consent to officials:

Please ch	neck eith	er "yes'	or "no" next to each statement:	
A.	A. To disclose the following records:			
	YES	_ NO	Records relating to any of my field-based experiences	
	YES	_ NO	Records relating to my performance in the field during student teaching	
	YES	_ NO	_ TExES test score results	
В.	B. To the following person(s):			
	 School districts or other agencies associated with field-based experiences 			
	 School-based/Agency-based administrators 			
	School-based/Agency-based cooperating teachers/mentors			
	University of North Texas at Dallas Program faculty			
I understand that under the Family Educational Rights and Privacy Act of 1974 ("FERPA" 20 USC 123g; 34 CFR §99; commonly known as the "Buckley Amendment") no disclosure of my records can be made without my written consent unless otherwise provided for in legal statutes and judicial decisions. I also understand that I may revoke this consent at any time (via written request to the educator preparation program) except to the extent that action has already been taken upon this release. Further, without such a release, I am unable to participate in any field-based experiences including 30 clock hours of observation, clinical teaching, student teaching, or internship.				
Printed Na	me of Can	didate		
Signature of	of Candida	nte	Date	
UNT Dallas Student ID Number:				
Email:				