TMCC
Truckee Meadows Community College
Admissions and Records Office

Instructions | Reset | Print

STUDENT CONSENT FOR RELEASE OF RECORDS

Return Completed Form To:
TMCC Admissions and Records Office
7000 Dandini Blvd., RDMT 319
Reno, NV 89512-3999
or via email to: admissions@tmcc.edu

If completing a hard copy, please use black or blue ink only.

Student Information				
Last Name	First Name			
Name While Attending TMCC *(if different from above)*	Date of Birth *(mm/dd/yyyy)*	NSHE ID # ***or*** Last Four Digits of Social Security #		
Email Address	Telephone Number	Alternate Telephone Number		
Street Address Apt. *(if applicable)*	City	State	Zip Code	

Information to be Released

Effective From *(mm/dd/yyyy)* _____ **Until** *(mm/dd/yyyy)* _____

Note: if an "effective from-until" date is not provided, TMCC will leave your information release request in effect until we are provided with another form by you to rescind it.

Release Information

Under federal legislation, namely the U.S. Department of Education's Family Educational and Privacy Act (FERPA), I understand that my educational records cannot be released without my permission.

I therefore request that the information listed above be released to the following:

Last Name	First Name			
Street Address Apt. *(if applicable)*	City	State	Zip Code	
Email Address	Telephone Number	Alternate Telephone Number		

Signature

Student's Signature	Date

TMCC is an EEO/AA institution. See http://eeo.tmcc.edu for more information.