Utah’s Statewide GEAR UP Education Program
College Authorization for Release of Information

I, ________________________________ (Student Name), do hereby grant the approved designees of Utah’s Statewide GEAR UP Education Program, authorization to contact parent(s)/guardian(s) and myself, and to release and/or obtain information from institutional, state, federal and other national data sources regarding my college/university educational records. I specifically give permission to __________________________ (Name of College or University) to release the following selected information that may be covered by the Family Educational Rights and Privacy Act (FERPA) to the approved designees of the Utah’s Statewide GEAR UP Education:

- X Class Schedules
- X Cumulative Student Record
- X Disciplinary Actions
- X Student Academic Progress
- X Enrollment Status
- X Early Warning/Alert Status
- X Transcripts, Grade Reports, & Test Scores
- X Attendance (if available)
- X Financial Aid Information
- X Area of Study Information
- X Degree Audit
- X All College Records

Purpose for release of information:
To track student’s success in school and help facilitate their preparation for and success in continuing their education as they transition from high school into college, and progress towards graduation.

I understand that I may revoke this release at any time by informing this institution in writing.

This release is effective as of the date signed.

Student Signature               Age               Date

Student College/University ID #

If you are under 18 years old as of the date you signed this release of information, you must also obtain a signature from your parent or guardian.

Parent/Guardian Signature               Date