

STUDENT RELEASES

I. FERPA RELEASE: PERMISSION FOR ACCESS TO EDUCATIONAL RECORDS

This form allows students to grant third parties, including parents, access to their educational records maintained by the student's college. The Family Educational Rights and Privacy Act of 1974 ("FERPA" or the "Buckley Amendment") prohibits access to, or release of, educational records or personally identifiable information contained in such records (other than directory information) without the written consent of the student, with certain regulatory exceptions. A description of a student's rights under FERPA is set forth in more detail in the college catalog.

Participant Name (please print): _____

Social Security Number or University Identification Number: _____

I, the undersigned, hereby authorize The City University of New York (including, without, limitation, its constituent colleges and units, "CUNY") and the CUNY EDGE Program (the "Program") to release the following records and information (identify records or types of records below):

Demographic information (such as age, gender, and ethnicity), public assistance participation status, service utilization and employment information (including, but not limited to, all employment placements related to CUNY EDGE, and employer name, salary, job title, start date, copies of pay stubs, and the like), testimonials, materials submitted by staff to nominate student for awards or special recognition, class enrollment and attendance, CUNY EDGE and academic progress, college schedule and credit information (including but not limited to all student classes, labs, work study jobs and internships, and the like), grade point average, and a completed copy of this "Student Releases" document and all information contained herein.

These records can be released to the following person/agency:

New York City Human Resources Administration ("HRA")

These records are being released for the purposes stated below:

To illustrate and document the impact, performance and outcomes of the Program and to comply with requirements of funding sources. In addition, the information may be used by HRA for Cash Assistance and Food Stamp purposes.

Note: Please note that "directory information" can be given out without the student's written consent. The City University of New York defines the directory information to include such information as a student's name, attendance dates, home and e-mail address, telephone number, date and place of birth, photograph, status (e.g., full/part-time, undergraduate/graduate), degree program, credits completed, major, student activities and sports, previous school attended, and degrees, honors and awards received. This information may be released to anyone, unless restricted by written authorization of the student. Contact the CUNY EDGE Program Director at your campus if you wish to restrict this information.

II. HRA RELEASE: PERMISSION TO RELEASE PUBLIC ASSISTANCE RECORDS

This form also allows the student identified above to grant the New York City Human Resources Administration ("HRA") the right to release the student's Cash Assistance and Food Stamp records.

I, the undersigned, hereby authorize HRA to disclose to The City University of New York (including, without limitation, its constituent colleges and units, "CUNY") and to the CUNY EDGE Program (the "Program") my Cash Assistance and Food Stamp records so that the CUNY EDGE may verify my eligibility for its services. I understand that my Cash Assistance and Food Stamp records will not be used by CUNY or the Program for any other purpose or shared with any other person or entity without my prior written consent.

This authorization to release the above information is valid from the date of signing until I no longer participate in CUNY EDGE. I understand that I may revoke this authorization except to the extent that

action has already been taken based on this authorization. I have the right to revoke this authorization at any time upon written notice to HRA and CUNY at the following addresses:

To HRA:

Educational Services/Training Assessment Group (TAG)
Family Independence Administration
109 East 16th Street
New York, NY 10006
Attn: NYC HRA 2017 CUNY MOU – CUNY EDGE

To CUNY:

Office of Academic Affairs – CUNY EDGE
The City University of New York
555 West 57th Street, 13th Floor
New York, NY 10019

I understand that such a revocation may affect my eligibility for HRA benefits.

Applicant's/Participant's Signature

Date

Checking this box certifies my electronic signature of this document.