



International Student Authorization To Release Educational Records

Student Information

Name _____ ID # P00 _____

Information

The Family Education Rights and Privacy Act of 1974 provides privacy protection of a student's education records and limits the release of such records without the student's consent. The Act further provides that the educational institution may disclose such records to a third party with the student's written consent.

Declaration

I understand and authorize Lamar State College-Port Arthur officials to release my education records to Lamar University, International Education & Services in order to maintain my Sevis I-20/F-1 Visa status.

Certification and Signature

STUDENT'S DECLARATION:

I acknowledge I am aware of this request to release my education records to the Third Party specified above. I attest that I am the student signing this form. I understand the information may be released orally or in the form of written records as preferred by the requester. This authorization remains in effect from the date executed until revoked by me in writing and delivered to the Registrar's Office. I further release Lamar State College-Port Arthur, the Texas State University System, their Regents, Officers, Employees, Agents or Assigns, from any and all liability for release of the above-named education records/information and acknowledge that the educational institution is not responsible for subsequent uses or disclosures of records once they are released pursuant to this authorization.

Student's Signature _____ Date _____

Submit this completed form and all supporting documents to **Lamar State College Port Arthur Registrar's Office** using one of the preferred methods below.

Mail: LSCPA Office of the Registrar • PO Box 310 • Port Arthur, TX 77641

Drop off: 3rd Floor, Student Center, Room 303B

Scan and email: Registrar@lamarpa.edu

Fax: 409-984-6025