Student Information Release Proxy

Completed form must be presented to the Office of the Registrar
Mesa Vista Hall - North - Phone # 505.277.8900

I, _____, hereby give consent to the University of New Mexico to release records and other information covered by the Family Rights and Privacy act of 1974 (FERPA). I understand that by signing this form my records and information can be released without my knowledge to the individual(s) listed below. The individual(s) have access to to my information for the _____ academic year. I understand this release cannot exceed one academic year in length.

_____

Student Signature | UNM ID # | Date

The individual(s) listed below have access to records and information maintained by the offices listed below.

- ☐ Office of the Registrar - Academic Transcripts, Enrollment Certificates
- ☐ Dean of Students - FERPA Authorized Disciplinary Information
- ☐ Bursars Office - Student Financial Information
- ☐ Housing Office - Account and Assignment Information
- ☐ Admissions - Admission Status, Documents Related to Admission, Residency Status of New Students
- ☐ Academic Advising - Information Related to Advising Sessions, Progress Toward a Degree, Course Selection, and Application for a Degree Program or For Graduation
- ☐ Center for Academic Program Support (CAPS) - Visit history from CAPS database.
- ☐ Financial Aid Office -
  - ☐ The status of my Financial Aid file
  - ☐ My Financial Aid Awards
  - ☐ All documentation in my file
  - ☐ Other (must be specified below)

_____

_____

_____

The information maintained by the office(s) selected above may be released to the following individual(s):

_____

Printed Name | Relationship to Student

_____

Printed Name | Relationship to Student

The student must present this form to the Office of the Registrar (Mesa Vista North) with a valid state or federally issued photo ID. **If the form is faxed, mailed, or submitted by someone other than the student it MUST BE NOTARIZED in the space below.**

Mailing to: Office of the Registrar, MSC11 6325, 1 University of New Mexico, Albuquerque, NM 87131-0001 - Fax to: 505.277.6809

For Official Use Only

Received by: _____

Date: _____

Type of ID: _____

Entered by: _____

Date: _____

Rev 200904