



STONEHILL

COLLEGE

Student Financial Services Office of the Registrar

The Family Educational Rights and Privacy Act of 1974 (FERPA), also known as the Buckley Amendment, helps protect the privacy of your student records. It prohibits access to those records by any third party including parents (with certain limited exceptions) unless you give written permission. In the absence of any other request from you, FERPA does permit parental access when you are a dependent of the parent(s) as defined in Section 152 of the Internal Revenue Code of 1954. Therefore, Stonehill College provides your student education records to your parents only if: (1) you consent, or (2) your parent(s) demonstrate(s) your dependency by providing a copy of one parent's federal income tax return for the most recent tax year. (The law states that if you are claimed as a dependent on a parent's federal income tax return for the most recent tax year, then the school may speak with either parent unless you request otherwise.)

Occasionally parents contact the College inquiring about the academic progress of their son or daughter or to check on financial information, such as billing statements or financial aid. While the College recognizes the importance of parental involvement in their son's or daughter's college experience, the College cannot provide information on your academic and financial records unless your parent can show that you are a dependent for tax purposes *or* you give the College written permission for the disclosure.

The enclosed form has two purposes:

1. to allow you to voluntarily consent to the release of certain types of information to others (financial aid, student account, and/or academic); and
2. to provide you the opportunity to have your billing statement sent to someone other than yourself.

We encourage you to discuss this letter and the enclosed document with your parent(s) and/or guardian. We ask that you sign and return the document to indicate your preferences for disclosure and/or non-disclosure for the various areas of concern, and to change billing information if appropriate.

You are under no obligation to provide permission to discuss your information with any other person. Your decision will be respected by the College. When properly signed and returned, this document will be used by College personnel to determine with whom they may share certain information about you instead of relying on copies of parent tax returns that indicate whether or not you were claimed as a dependent. You may revoke or change any of the information or permissions at any time by putting your request in writing and forwarding the change to either the Registrar or the Director of Student Financial Services.

Please sign and return one copy of the enclosed document to:

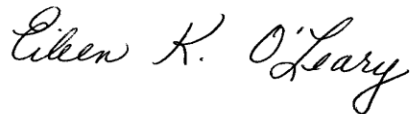
**Stonehill College
Registrar's Office
320 Washington Street
Easton, MA 02357**

If you do not sign and return the form, the college will

- under the FERPA regulations, be allowed to discuss your education records with either of your parents if at least one parent claims you as dependent on his/her most recent federal tax return and provides the College copy of that return;
- send your billing statement directly to you, the student.

We hope that this brief explanation of FERPA is helpful and will assist you and the College in our mutual efforts. For more information on FERPA, you may go to the Registrar's Office webpage at Stonehill.edu under Academics. We welcome you to Stonehill and look forward to meeting you.

Sincerely,



Eileen K. O'Leary
Assistant Vice President Student Financial Services



John D. Pestana
Registrar



STONEHILL
COLLEGE

Student Name:
Student ID:

A. College policy is to mail the student billing statement directly to the student at the permanent address of record. If you want your student account billing to be sent to a different person, please list that person's name, address, and their relationship to you below. That person must also sign below:

Name: _____ Relationship: _____
Street: _____
City: _____ State: _____ Zip Code: _____

I acknowledge that the Student Billing Statement is to be sent to me.

Signature: _____

B. I voluntarily give the College my permission to discuss with the following person(s) (if any) information about me I have checked off:

1. Name: _____
Relationship to the Student: _____
Information to be shared:
 ____ Financial Aid File
 ____ Student Account/Billing
 ____ Academic Progress/Performance

2. Name: _____
Relationship to the Student: _____
Information to be shared:
 ____ Financial Aid File
 ____ Student Account/Billing
 ____ Academic Progress/Performance

C. Even if claimed as a dependent on my parent(s)' tax return, the College may not discuss financial aid, student account/billing or academic progress/performance issues with a parent not listed above. Please check (✓) if appropriate: _____

I understand under the Family Educational Rights and Privacy Act of 1974 (FERPA), I may rescind or modify any of the permissions granted by providing written request to the Director of Student Financial Services or the Registrar of Stonehill College.

Signed: _____ Date: _____
(Student)

Return this form to:
Stonehill College
Registrar's Office
320 Washington Street
Easton, MA 02357



Student Name:
Student ID:

A. College policy is to mail the student billing statement directly to the student at the permanent address of record. If you want your student account billing to be sent to a different person, please list that person's name, address, and their relationship to you below. That person must also sign below:

Name: _____ Relationship: _____
Street: _____
City: _____ State: _____ Zip Code: _____

I acknowledge that the Student Billing Statement is to be sent to me.

Signature: _____

B. I voluntarily give the College my permission to discuss with the following person(s) (if any) information about me I have checked off:

1. Name: _____
Relationship to the Student: _____
Information to be shared:
____ Financial Aid File
____ Student Account/Billing
____ Academic Progress/Performance

2. Name: _____
Relationship to the Student: _____
Information to be shared:
____ Financial Aid File
____ Student Account/Billing
____ Academic Progress/Performance

C. Even if claimed as a dependent on my parent(s)' tax return, the College may not discuss financial aid, student account/billing or academic progress/performance issues with a parent not listed above. Please check (✓) if appropriate: _____

I understand under the Family Educational Rights and Privacy Act of 1974 (FERPA), I may rescind or modify any of the permissions granted by providing written request to the Director of Student Financial Services or the Registrar of Stonehill College.

Signed: _____ Date: _____
(Student)

RETAIN THIS COPY FOR YOUR RECORDS