

**South Texas College**  
**Form for Disclosure to Parents of Dependent Students**  
**and Consent Form for Disclosure to Parents**

To: Faculty/Instructor: \_\_\_\_\_

From: \_\_\_\_\_  
Student's First Name                      Middle Initial                      Last Name  
\_\_\_\_\_  
Permanent Street Address                      City                      State                      Zip Code

Under the Family Educational Rights and Privacy Act (FERPA), South Texas College Faculty are permitted to disclose information from your education records to your parents if your parents (or one of your parents) claim you as a dependent for federal tax purposes. Please indicate whether your parents claim you as a tax dependent.

Please check the appropriate box:

- Yes. I certify that my parents claim me as a dependent for federal income tax purposes. (Must provide supporting paperwork such as previous year's tax records)
- No. I certify that my parents do not claim me as a dependent for federal income tax purposes.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you are not claimed as a dependent or you do not know whether you are claimed as a dependent for federal income tax purposes, but agree that the above named **South Texas College Faculty/Instructor** may disclose information from your education records to your parents, please sign the following consent:

I consent to the disclosure of any personally identifiable information from my education records to my parent(s), for reasons determined by the **South Texas College Faculty/Instructor** as appropriate. This authorization will remain in effect for the date stated immediately below.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If parents live at the same address, please list both in # 1.*

1. _____	2. _____
Name(s)	Name(s)
_____	_____
Address	Address
_____	_____
City, State, Zip	City, State, Zip
_____	_____
Telephone	Telephone

*\*Students cannot be denied any educational services from South Texas College if they refuse to provide consent.*