



**SAVANNAH TECHNICAL COLLEGE
OFFICE OF STUDENT SUCCESS**

REQUEST TO RECORD ACCESS

Student Name (Print)

Student ID Number

At the postsecondary level, the right to inspect is limited solely to the student. A student may grant access to their record to a third party or individual.

Academic record information may be released only at the consent of the student and a consent form is placed on file by the student. Written consent is required. This consent will remain in effect unless it is revoked in writing by the student.

Therefore, I _____ give consent to

Savannah Technical College to release my academic information to the person or agency below, to include the following: (Check all that apply)

Admissions Record _____ Financial Aid _____ Academic Record _____

Graduation Information _____.

(Name of individual or agency(s):
_____)

Signature of Student

Date

Savannah Technical College Representative, Title, and Date