

Office of the Registrar - FERPA REVOCATION OF CONSENT TO RELEASE INFORMATION

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Student ID#:	Last Name:	First Name:	MI:
	FERPA Revocatio	n of Consent to Release Information	
	Release Information and under	y Educational Rights and Privacy Act (FERPA I <u>reversels</u> restand that the CODE PHRASE previously given	
		apply to information being sought through a lavated in compliance with FERPA and Cape Cod Co	-
the Registrar to va		tion form with a new CODE PHRASE must be filed preceive information and/or allow discussion. I uris.	
Student Signature	e:	Date:	
Office of Registrar Use:			
Date Received by	y Registrar:	Receiver's Initials:	