

## Request for Access to Student Academic Records \*Banner/ARC/AIR/CyberFriar\*

## **Part 1: Please Print**

Check One: _	Staff Access Faculty Access		
_	Student Worker/Grad Asst. Access		
Employee Nan	ne:Last		76111 7 111
			Middle Initial
Banner ID Nu	mber:		
Email:			
Phone:			
Department:		Position:	
Access Reque	ested:		
Same Access	As (Name and Username):		
Reason for Re	equest:		
Immediate Sup	ervisor's Signature	Date	
Along with the ri students particular members of the fa confidentiality. Y Providence Colleg Home Address/Te Recognized Sports and Awards Rece	Confidentiality Statement) ght to access student educational records at Providence ly as outlined in the Family Educational Rights an aculty and staff who have a legitimate need to know ou must access only that information needed to complete the has established the following as directory infollephone Number, Email Address, Date and Place of Bir s, Height/Weight of Members of Athletic Teams, ived, and Previous Educational Institutions Attended. and Student Schedule) is confidential and may not be	d Privacy Act (FERPA). Student their contents; however, you do have the your assigned or authorized task. Unraction: Student's Name, Local Arth, Major Field of Study, Class Year, Full or Part time Enrollment statu All other information (e.g., Grades,	records are open to we a responsibility to maintain Under the terms of FERPA, address/Telephone Number, Participation in Officially is, Dates of Attendance, Degrees Social Security Numbers,
I have read the ab	pove and agree to maintain the confidentiality of st	udent records.	
Employee Signa	ature	Dat	re