



California State University, Los Angeles
 CONSENT TO DISCLOSE STUDENT ACADEMIC RECORDS

Under provisions of the Family Educational Rights and Privacy Act of 1974, and the State of Student Rights and Responsibilities of California State University Los Angeles, my signature gives permission to the Registrar's Office at California State University, Los Angeles to release academic information to the Director, Center for Student Development and Programs regarding my G.P.A. and status as a currently enrolled or continuing student at CSLA. My enrollment status, my G.P.A. for the most recent academic term and my cumulative G.P.A. will be verified by the Registrar's Office on a quarterly basis for the duration of 2003-2004 academic year at CSLA.

All academic information gathered on behalf of the Center for Student Development and Programs will be used for enrollment and G.P.A. purposes, and be kept in strict confidence.

Academic Year 2003-2004

Student Organization Name	Quarter/Year request is made
Student Name (Please Print Full Name)	SID
Student Signature	Date

FOR OFFICE USE ONLY

	VERIFIED BY	GPA	STATUS
Fall			
Winter			
Spring			
Summer			