THE FAMILY EDUCATION RIGHTS AND PRIVACY ACT
“THE BUCKLEY AMENDMENT”

In 1974, FERPA was enacted to give students certain rights with regard to their educational records. It affords students the right to 1) inspect and review their educational records; 2) request the amendment of inaccurate or misleading records; 3) consent to disclosure of personally identifiable information contained in their educational records; and 4) file a complaint with the U.S. Department of Education concerning alleged failures by the institution to comply with this law. The Act applies to all institutions that are recipients of federal funding.

Academic Advisors:
Please be certain your advisee understands his or her rights in accordance with FERPA. Highlights of Butler’s policy are listed below. Secure a signature on the reverse of this sheet indicating your advisee’s preference.

If a student grants permission for an advisor to discuss academic information with his/her parent(s)/guardian(s) that permission does NOT extend to the student’s professors. This document ONLY applies to a student’s academic advisor.

Butler abides by the following practices in regard to educational records:

- Academic information may be shared with the student’s advisor, academic dean, and University personnel with legitimate educational interest.

- If a parent/guardian contacts you concerning a student’s progress, never assume that you can share student information with a parent/guardian or other interested party. Proceed one of two ways:
  1. Secure a signed statement from the student waiving privacy for the specific parent/guardian.
  2. Refer the parent/guardian to the student’s academic dean.

- If you have a signed waiver (see reverse side) from the student, schedule a conference during a time that allows the student to be present. It is preferred that such conversations take place in person, with the student present, but other arrangements are available if FERPA conditions for authenticating the “third parties” named on the student release can be met. For example, having the student present for a scheduled telephone conference would allow for verification that the parties on the phone are indeed those listed on the release.

- If you have concerns about any of the following: changes in behavior or other physical, mental or emotional signs of problems, please consult the Office of Student Affairs, the Learning Resource Center, or the student’s academic dean.

- Health and Counseling Services must comply with FERPA and with health privacy laws. Students may sign an independent release that will allow health and counseling staff to share information with parents and guardians. This information is not available to faculty and staff as it is not of legitimate educational interest.

For full discussion of FERPA, see the following for additional resources:


*Please note: this permission does NOT extend to professors; this document ONLY applies to academic advisors.*

Revised 2014
RELEASE OF ACADEMIC INFORMATION -- PERMISSION FOR ADVISOR TO TALK WITH A PARENT OR GUARDIAN

Under Section 438 of the 1975 Federal Education Provisions Act, every Butler University student is guaranteed certain rights involving access to specified educational records. In compliance with Federal Law P.L. 93-980 (Family Education Rights and Privacy Act of 1974), the student advisee must complete and sign the following statement before the advisor may discuss academic issues with the parent(s)/guardian(s).

☐ Yes, I give permission to my advisor* to discuss academic issues with my parent(s) or guardian(s). When possible, my advisor will attempt to contact me and let me know the concern of my parent/guardian.

☐ No, I do not wish to allow my parent(s)/guardian(s) access to my academic advising records.

Any time information is requested or released, FERPA mandates documentation:

Date: ________________ Request Made By: _____________________________

Relationship to Student: _____________________________________________

Reason for Request: _______________________________________________

Information requested/released: _______________________________________

Date: ________________ Request Made By: _____________________________

Relationship to Student: _____________________________________________

Reason for Request: _______________________________________________

Information requested/released: _______________________________________

*Please note: this permission does NOT extend to professors; this document ONLY applies to academic advisors.