RANDOLPH COMMUNITY COLLEGE | OFFICE OF FINANCIAL ASSISTANCE

2027-2028 Student Status and Financial Assistance Disclosure Form

According to Federal laws and regulations surrounding the disclosure of Student information ((34 CFR §§ 99.31, 99.35, and 99.37), we are allowed to disclose items that include personally identifiable information to the parties below:

• School officials with a legitimate educational interest;
• Schools in which a student seeks or intends to enroll;
• Authorized representatives of Federal, State and local educational authorities conducting an audit, evaluation, or enforcement of Federally or State-supported education programs;
• In connection with financial aid for which the student has applied or which the student has received, if the information is necessary for certain purposes;
• A victim of an alleged perpetrator of a crime of violence or non-forcible sex offense;
• To anyone if the disclosure is in connection with a disciplinary proceeding in which the institution discloses the final results of the proceeding in which the student was found to be an alleged perpetrator of a crime of violence or non-forcible sex offense;
• Organizations conducting studies to improve instruction, administer student aid programs, or develop, validate, or administer predictive tests on behalf of schools;
• Accrediting organizations;
• Parents of a dependent student;
• To comply with a judicial order or subpoena, after a reasonable effort to notify the student, unless the subpoena is a Federal grand jury subpoena or any other subpoena issued for a law enforcement purpose and the court or other issuing agency has ordered that the existence of the contents of the subpoena or the information furnished not be disclosed;
• In a health or safety emergency; and
• Directory information.

Please fill out **each** line below:

• The specific records that you would like to be disclosed: _____
_____.

• The purpose of the disclosure: _____
_____.

• The identity of the individual(s) or group(s) who will have access to the records: _____
_____.

Certifications and Signatures
Each person signing below certifies that all of the information reported is complete and correct.
The student and one parent whose information was reported on the FAFSA must sign and date.

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

_____ _____
Print Student's Name RCC Student ID or SSN

_____ _____
Student's Signature (Required) Date

_____ _____
Parent's Signature (Required if Dependent) Date