



Request for Disclosure of Educational Records from Parent(s) of Dependent Students

Student's First Name Middle Initial Last Name

Permanent Street Address City State Zip Code

Under the Family Educational Rights and Privacy Act (FERPA), NEOMED is permitted to disclose information to you from your child's education records if you have claimed your child as a dependent for federal tax purposes on your most recent federal income tax return.

- Yes, I certify that I/we claim _____ as a dependent for federal tax purposes.

- Attached is a copy of my/our most recent federal income tax return evidencing this fact for the for the 20 ____ - 20 ____ school year.

Signature: _____ Date: _____

Signature: _____ Date: _____

Parent Name(s)

Parent Address

City, State, Zip

Telephone

Address (if different)

City, State, Zip (if different)

Telephone (if different)