

LOUISIANA DELTA COMMUNITY COLLEGE

Division of Student Affairs · Department of Enrollment Services
Revocation of Authorization for Release of Information

REVOCAION OF AUTHORIZATION FOR THE RELEASE OF GRADE(S), ACADEMIC STATUS, ENROLLMENT STATUS, ATTENDANCE AND FINANCIAL DISCLOSURE

I no longer authorize Louisiana Delta Community College (LDCC) to release my grades, academic and enrollment status, class schedule, attendance, financial and other enrollment related information to my parent(s), or other named individuals or entities listed below.

Please Print:

Name

Name

Relationship

Relationship

Address

Address

City, State, Zip

City, State, Zip

Email

Email

If I have previously authorized the release of information to any parties not named in this form, I understand that I must submit and sign an additional revocation form(s) in order for those prior authorizations to be revoked.

PLEASE NOTE: This form must be submitted in person by the student requesting this release.

Student Name: (Print) _____

Student Signature: _____

Student ID Number: _____

Date: _____

Enrollment Services use only

Form of ID _____ Identity Verified By: _____

Date: _____