Isothermal Community College Student Education Records Acknowledgement Form

Student's First Name	Mic	ddle Initial	Last Name	
Street Address	City	State	Zip Code	
SL 2025-46, Isotherm	al Commun	nity College is p t(s)/legal guar	permitted to disclos	.S.C. § 1232g and Leon's Law, se information from your nsent, if they claim you as a
I,[Student Name]_ Educational Rights an		_		ed under the Family
(1) My education requested.	records wi	ll be provided	to my parent(s)/leg	gal guardian(s), if
· · ·		•	to the school admi dually enrolled.	nistrators and school
Student Signature:				Date:
Provide Contact Infor	mation for	parent(s)/lega	l guardian(s):	
Parent/Guardian 1 Na Phone Number Email Address				
Parent/Guardian 2 Na Phone Number Email Address				

Isothermal Community College Parental Educational Records Request and Certification of Parental Identity and Student Dependent Status for Federal Income Tax Purposes

According to federal law, once a student enrolls in an institution of higher education, whether the student is over 18 or not, the student's parents/guardians no longer have automatic access to the student's education records. However, if the parents/guardians claim the student as a dependent on their federal income tax return, they may have access to the student's **Isothermal Community College** educational records without the student's prior written consent.

If you would like to request access to your student's educational records, please complete and submit the form below attesting that (1) you are the parent of the student listed on this form, and (2) you claimed said student as a dependent for taxes purposes on your federal income tax return in the most current tax year. Misrepresentation of either of these two conditions is a crime.

Please Note: If you have more than one child enrolled at Isothermal Community College, please

Student's Name

Student's ID Number

I/we certify that the above-named student is my/our child and that I/we claimed him/her as a dependent on a federal income tax return for Tax Year ____. I/we also certify that we intend to claim the above-named student as a dependent on a federal income tax return for the current tax year.

Parent/Guardian's Signature _____ Parent/Guardian Signature _____

Parent/Guardian Name(s) and Address(es) (please print)

Received on:

Valid until: