FERPA

The Family Educational Rights and Privacy Act (FERPA) of 1974 mandates that information contained in a student’s education record must be kept confidential and outlines the procedures for review, release and access of such information.

A complete policy statement on the EWU implementation of FERPA can be found in the Registrar’s Office. In part, the policy states that officials of EWU may be given access to student education records on a “need-to-know” basis and that such access MUST be limited to job-related, legitimate educational interests. The information contained in a student’s education record MAY NOT be released to a third party without the written consent of the student.

If directory information is not restricted by the student on the Student Information System (SIS) database, the only exception would be directory information defined as:

- the student’s name
- local/permanent mailing addresses
- email addresses
- telephone numbers
- date and place of birth
- major field of study
- participation in officially recognized activities and sports
- dates of attendance
- degrees and awards received
- and the most recent previous educational institution attended

Inappropriate use or misuse of student records is a violation of EWU Statutes and could result in civil and/or criminal prosecution. Examples of inappropriate use of student records are, but not limited to:

- Releasing confidential student information (non-directory) to another student, EWU organization, or parents, or any person who does NOT have a legitimate educational interest; without the student’s written authorization.
- Leaving reports containing confidential student information in view of or accessible to others who do NOT have a legitimate education interest in the data.
- Discussing the information contained in the student record outside of EWU or while on the job with individuals who do NOT have a legitimate educational interest or (need-to-know) in the data.

Under NO circumstances should an employee give confidential information about students to any other students, to other employees, or to any other person who has NOT BEEN AUTHORIZED to receive such information by their position or by their departmental supervisor. Although directory information may be released without prior consent, any requests coming from students or from anyone off campus should be referred to the Registrar.

I-200

The Washington State Civil Rights Act (I-200) of 1998 prohibits government entities from discriminating or granting preferential treatment based on race, sex, color, ethnicity, or national origin.

A complete EWU Implementation Statement and Gov. Locke Directive regarding I-200 can be found in the EWU office of Legal Affairs. In part and specifically in relation to this form, the Implementation Statement issued by President Jordan supports the Governor’s Directive to continue broad-based student recruitment and outreach programs designed to enhance diversity.

All uses of student information MUST be in accordance with the mandates of I-200. As per the EWU Implementation Statement, questions regarding appropriate uses of student information may be directed to your respective vice presidents for coordination with our Legal Affairs office.

Statement of Responsibility

*Signature must be present for request to be processed.

All employees of Eastern Washington University (academic, administrative, classified staff and students) are required to abide by the policies governing access, review, request, release and use of student education records.

I have read and clearly understand it is my full responsibility to respect and maintain the confidentiality of all information in accordance to FERPA and to accept full responsibility for those I designate to handle this information in my place.

AND,

I have read and clearly understand it is my full responsibility to verify my use of this information complies with the Washington State Civil Rights Act (I-200) of 1998 and the EWU I-200 Implementation Statement set forth by President Jordan.

Signature____________________________________ Date__________________________________

- CONTINUE ON REVERSE -
***Please keep a copy of this form for your future reference. Retain the name of each report for future requests.***

Name of person requesting data: __________________________________________ Phone: ____________________________

Department: _____________________________________ Mail Stop: _______ Today’s Date: __________________

Name of Report: (Provided by SIS Tech Services) __________________________________ Date Needed: ________________

To assist you in receiving the correct output, please describe the purpose of the request and how it will be used:

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

**INFORMATION REQUEST DEFINITION - Please complete all sections that apply.**

Title/information to appear on top of report (header): ______________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Report output desired and quantity: # lists___ # labels___ merge file___

Output format via: (circle all that apply)       hard copy             floppy disc (provide own)            email attachment

Label address preference:          local (during school year)            permanent (parents or summer)

Define population/group of data to be included: (ie: prospects, applied, admitted, enrolled, which terms or quarters, full-time/part-time, award year)
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

List data to be included in output: (ie: first name, last name, ssn, EWU ID, address, phone, gender, term, status, etc…)
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
How do you wish data to be arranged in your output file: (define columns & rows…..please be as specific as possible.)
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

How do you wish your output sorted: (ie: by zipcode, alpha by last name, high to low, quarter, major) *label requests will automatically come in zip order unless otherwise requested. Multiple sorts are possible. Please be specific.
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Special instructions: __________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

**Please submit this form and/or questions to the person closest matching your requested data population:**

Prospect/Applied/Admitted Data:  Ben Morgan     101SUT  x4326
Enrolled/Current Data:   Abe Johnson     201SUT  x6576
Financial Aid Data:   Debbie Akin           102SUT  x2315
Other Data Requests:   Ron Syth    301SUT  x6810

Signature of Person making Request **Must Be Present**
On back of form for Request to be Processed. Thank you.

***Technical Support Use Only***

Date request received: ____________ Date completed: ____________ Initials: ____________ Ready call: ____________ Pick-up locale: ____________