



California Miramar University
“Educating Tomorrow’s Business Leaders Today”
9750 Miramar Road, Suite 180 San Diego, CA 92126
(858) 653-3000 • www.calmu.edu

Family Educational Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act of 1974 (FERPA) affords a student certain rights with respect to their educational records. California Miramar University (CMU) acknowledges this law as university policy. Please review the following information and contact the Office of the Registrar in the event you have additional questions or concerns.

Enforcement and Penalties

The CMU Office of the Registrar is responsible for university compliance with this policy. Responsibility for administering the act by the federal government has been assigned to the Family Policy Compliance Office within the United States Department of Education. This office reviews and investigates complaints and attempts to bring compliance through voluntary means.

Under the provisions of this law, students are entitled to the following privileges:

- Inspection and review of the student’s educational records within 45 days of students request.
- Request of amendments to the student’s records to ensure that they are not inaccurate, misleading, or otherwise in violation of the student’s privacy or other rights.
- Consent to disclosures of personally identifiable information contained in the student’s educational records, except to the extent that FERPA authorizes disclosure without consent.
- File a complaint with the U.S. Department of Education concerning alleged failures by CMU to comply with FERPA requirements in the instance that a complaint cannot be resolved within the University.

Requests by students to inspect, review, disclose or amend must be submitted in writing and identify the following:

- Record the student wishes to inspect
- Purpose of the disclosure
- Records that may be disclosed
- The party or class of parties to whom the disclosure may be made
- Signature and date

Recently, the FERPA regulations have been amended to allow that request to be made electronically. In addition to the aforementioned information, the consent form must:

- Identify and authenticate a particular person as the source of the electronic consent; and
- Indicate that person's approval of the information contained in the electronic consent.

For requests to amend, students must clearly identify the portion of the educational record the student is requesting be changed, and specify why the record should be changed. If the requested change is not approved, the student will be notified of the University's decision, and the student's right to a hearing.

To What Records Does the Act Apply?

The act applies to all education records maintained by CMU, and all parties acting for CMU, which are directly related to a student. Records containing a student's name, identification number, or other personally identifiable information, in whatever medium, are covered by FERPA unless identified in one of the act's excluded categories.

FERPA allows schools to disclose student records, without consent, to the following parties:

- School officials with legitimate educational interest
- Other schools to which a student is transferring
- Specified officials for audit of evaluation purposes
- Appropriate parties in connection with financial aid to a student
- Organizations conducting certain studies for or on behalf of the school
- Accrediting organizations
- Appropriate officials in cases of health and safety emergencies
- State and local authorities

Contact Us

Please contact the Office of the Registrar at 858-653-3000 or registrar@calmu.edu if you have any additional questions or concerns about our privacy policy. We have provided links below for your convenience:

For additional information please follow the below link:

<http://www.ed.gov/policy/gen/guid/fpco/index.html>



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Consent to Release Student Information

I, the undersigned authorize California Miramar university to release information contained in my student records to the following individual:

INDIVIDUAL AUTHORIZED TO RECEIVE EDUCATIONAL RECORD INFORMATION	
LEGAL NAME	
Last: _____	Middle: _____ First: _____
PERMANENT MAILING ADDRESS	
Mailing Address: _____	Apt./Suite: _____
City: _____	State: _____ Zip Code: _____
Country: _____	Intl. Postal Code: _____
Email Address: _____	
HOME TELEPHONE	
() -	
ALT. TELEPHONE	
() - Ext:	
RELATIONSHIP TO STUDENT	
<input type="checkbox"/> Family Member <input type="checkbox"/> Employer <input type="checkbox"/> Attorney <input type="checkbox"/> Other	

I understand that by signing this form, information included in my student records may be released either orally or in the form of copies to the individual listed above, via email, fax or print, and this consent will remain in effect until revoked by me in writing and mailed to the Department of Student Services at the address listed below.

Student/Graduate Name (please print) _____ I.D. Number _____

Signature _____ Date _____

To submit, please send this form to the following address:

California Miramar University
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 9750 Miramar Road, Suite 180
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