

Ohlone College – Office of Admissions and Records
RELEASE OF INFORMATION WAIVER



Current Term: _____

Name: _____

ID#/SSN: _____

I, _____, release _____ to view my:
(Please print) (Please print)

- Student educational records for the current term only
- Student educational records for all past terms

Student Signature: _____

Note: A parent or legal guardian may request access to Student records if they can prove that the Student was claimed as a dependent on their previous year's tax return. In such cases, the college retains the right to still require the Student's signature.

I have claimed the above-named student on my tax records as a dependent for the last tax year.

Name: _____ Signature: _____
(Please print)

Relationship to student: _____

Office Use Only

Received by: _____

Tax records checked by: _____