



Kansas City Kansas Community College Student Support Services Release of Information

i, authorize kckcc	TRIO Student Support Services (SSS) to gathe
information concerning my academic progress (mid-semester	progress reports standardized test scores, grade
point average, earned credits, transcripts) and financial aid info	rmation prior to my participation and throughou
my involvement in SSS. I understand that this information is us	ed to assist in the determination of my eligibility
for the TRIO SSS program and it will be held strictly confidentia	l. I am aware that my eligibility, participation and
financial aid status will be reported to the U.S. Department of	Education in accordance with the grant funding
regulations.	
I certify that the information provided on this application is tr	ue and complete to the best of my knowledge.
also agree to provide documentation upon request to verify	the information reported. I am aware that the
personal information that is provided to the TRIO SSS Program	m will be protected under the Family Education
Rights Privacy Act of 1974. No one will have access to the info	ormation unless they work with or for the KCKCC
TRIO SSS Programs or they are specifically authorized by me to	see the information.
Upon formal acceptance into the program, I grant permission f	or program representatives to have access to my
official academic and financial records in order for TRIO SSS sta	aff to assist me. Additionally, in the course of my
involvement in the TRIO SSS program, TRIO SSS staff may con	sult with various KCKCC offices and programs to
secure and share the necessary information pertinent to my pa	articipation in the program and overall collegiate
success.	
Finally, I give my permission to use photographs, quotes, and s	tatements and/or print my first and last name ir
any and/or all publications for TRIO Student Support Services.	
Signature	Date
Parent's Signature (If applicants under the age of 18.)	