



Information Release Form

SUNY Apprenticeship Program & New York College Apprenticeship Network of the State University of New York

The Federal Educational Rights and Privacy Act of 1974, 20 U.S.C. § 1232g (FERPA), gives college students certain privacy rights over their education records. Colleges and universities are only allowed to release certain personally identifiable information from student education records if the student provides consent for such release, or if another legal exemption applies.

I, _____, **hereby consent** to the release of personally identifiable information from my post-secondary education records, as further defined below.

I understand and acknowledge that the records that may be disclosed may include personally identifiable information from my education records, including but not limited to my name, address, course and other training information, details regarding participation in the Program(s), information regarding salary/wages that I received from my Employer while a participant in the Program(s), and personal identifiers such as: my date of birth; self-identified sex, race/ethnicity, disability and ex-offender status(s); prior work/educational experience; and, social security number.

I understand and acknowledge that the purpose of any such disclosure is to assist the State University of New York (SUNY) and its Partner Agencies in obtaining and reporting required information concerning the placement, retention, and experience of students in the SUNY Apprenticeship Program and/or the New York College Apprenticeship Network of the State University of New York (the "Program(s)"). In furtherance of this purpose, I specifically authorize SUNY to request and obtain salary/wage information from my employer(s) as part of my participation in the Program(s) and to provide a copy of this form to said employer(s) to confirm my authorization, if requested.

I understand and acknowledge that the personally identifiable information from my education records may be disclosed to one or more the following entities in the course of administering these Programs: (1) Other SUNY offices, including SUNY System Administration and SUNY State-Operated and Community College campuses; (2) the New York State Department of Labor; (3) the United States Department of Labor; (4) the applicable Workforce Development Boards; (5) the Manufacturers Association of Central New York and their partners; and (6) the Research Foundation for the State University of New York (collectively, Partner Agencies).

SUNY agrees that it will only share personally identifiable information from my education records with the above entities pursuant to this consent to the extent necessary to administer the Programs.

Name of Student

Signature of Student

Date

The SUNY Apprenticeship Program is funded through appropriations in the New York State budget beginning in the 2016/17 Fiscal Year.

The NY College Apprenticeship Network is paid for by a \$7.9 million grant from the U.S. Department of Labor, Employment and Training Administration, administered by The Research Foundation for the State University of New York.