



**SOUTHERN METHODIST UNIVERSITY ("SMU")
PERKINS SCHOOL OF THEOLOGY**

**Student's Consent for SMU to Release Information to
United Methodist General Board of Higher Education and Ministry**

SMU ID: _____

Name: _____ (Last) (First) (Middle)
(please print)

The Family Educational Rights and Privacy Act of 1974, also known as "FERPA" and/or The Buckley Amendment of 1974, as amended, grants students attending post-secondary institutions certain rights and privacies regarding their education records. By submitting this form, the student may consent to release his/her education records and/or other information to a third-party for a defined purpose. A new form must be submitted for each request.

I hereby grant permission to Perkins School of Theology/Southern Methodist University to release my name and date of birth (for the purposes of matching my record with records of the General Board of Higher Education and Ministry), denomination, Annual Conference affiliation, degree program, and hours enrolled, to the United Methodist General Board of Higher Education and Ministry each semester. I also grant permission to release my name, degree program, program level, denomination, Annual Conference, admit term, expected graduation date, and contact information to representatives of my Annual Conference. This permission is granted for the duration of my enrollment in the Perkins School of Theology at SMU. I will notify the Perkins Registrar if my denomination or Annual Conference affiliation change. I understand that I may revoke this permission at any time by providing a written and signed request to the SMU Perkins Registrar.

Furthermore, by my signature below, I hereby release Southern Methodist University and the Perkins School of Theology, its Trustees, Officers, Employees, Volunteers, Agents or Assigns, from any and all liability for release of the above-named records/information.

Signature: _____ **Date:** _____

Please submit this form in person (preferred) to the SMU Perkins School of Theology, Registrar, P.O. Box 750133, Dallas, TX 75275-0133 or by Fax to 214-768-4245. When mailing or faxing the form, you will need to include a copy of valid ID with signature. Submission via email (scanned attachment) to: jmonroy@smu.edu is also accepted.