

## ACADEMIC INFORMATION RESTRICTION

- Complete this form to revoke parent/guardian access to your educational records.
- Forms submitted without a student signature will not be processed.
- This request will remain in effect until you re-file an Academic Information Release form.
- Parent(s)/guardian(s) may still obtain access to their dependent student's educational records by providing a signed release with a copy of the most recent year's income tax statement noting the dependency status of the student.

**Student Name (please print LEGIBLY):** \_\_\_\_\_

**Student ID:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Forms submitted without student signature will NOT be processed.*

I would like to revoke access to my educational records for the following:

**Parent/legal guardian:**

**Parent/legal guardian:**

\_\_\_\_\_

\_\_\_\_\_

**Relationship:**

**Relationship:**

\_\_\_\_\_

\_\_\_\_\_

St. Lawrence University  
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