



MANATEE TECHNICAL INSTITUTE  
 STUDENT RECORDS DEPARTMENT  
 5603 34<sup>th</sup> Street W  
 BRADENTON, FL 34210  
 941-751-7900 / EXT. 2096 or 2097 / FAX: 941-727-6491



**STUDENT RECORDS RELEASE AUTHORIZATION**

- Transcript
- Verification Letter
- Attendance
- Financial Aid/Student Accounts
- Grades
- Clock Hours Completed
- Other: \_\_\_\_\_

This release is valid from the date signed to \_\_\_\_\_ (mm/dd/yy)

Records of (full name while in school) \_\_\_\_\_  
 First Middle Last Maiden

Date of Birth: \_\_\_\_\_ Student ID Number: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

**Requested Information To:**

Person: \_\_\_\_\_

Address: \_\_\_\_\_

This listed person is identified as:

- Parent
- Spouse
- Other \_\_\_\_\_

PLEASE READ CAREFULLY

I hereby grant Manatee Technical Institute, their legal representatives and assigns, the right and permission to disclose the above noted information to the agency/individual listed above. I understand that this form authorizes Manatee Technical Institute to disclose personally identifiable information from my educational record to a third party and I release Manatee Technical Institute, its employees, officers and trustees, from any liability for acting in accordance herewith.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

IDENTIFICATION PROVIDED: \_\_\_\_\_  
 (Official Picture ID, Driver License, State Issued photo I.D., or Passport)

WITNESS \_\_\_\_\_  
 (Witness must be a School District employee)

**OR NOTARY:**

COUNTY OF \_\_\_\_\_ )

STATE OF \_\_\_\_\_ )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_, by \_\_\_\_\_, who is personally known to me OR has provided \_\_\_\_\_ as identification.  
 (SEAL)

Name: \_\_\_\_\_  
 NOTARY PUBLIC  
 STATE OF \_\_\_\_\_ AT LARGE  
 Commission Expires: \_\_\_\_\_

**Rights to and Access Procedures: Florida State Statute 1002.22 - Compliance with a written request to receive a Student'(s) Educational Record shall be done as quickly as administratively feasible/reasonable or within Thirty (30) Calendar days.**

FOR OFFICE USE ONLY  
 Date Received: \_\_\_\_\_ Date Sent: \_\_\_\_\_ by: \_\_\_\_\_