

Trade Related Instruction Program Release Form
A. Information Authorization Release

I, _____, hereby authorize the Delta College Skilled Trades Office
Student Full Name
to release to my sponsoring employer _____, my semester
Name of Company
attendance records, grades, progress report, and any other necessary information relating to my
apprenticeship training program at Delta College.

Student Signature Student Number

Date

The purpose of this release (per 34 CFR Section 99.30) is to meet the Family Educational and Privacy Rights Act (FERPA), 20 USCS 1232g.

If we do not receive this form from you and your employer requests this information, we will advise the employer that you have not authorized release of the information.

B. Financial Authorization Release

I, _____, understand that I am responsible for all unpaid financial
Student Full Name
obligations that I incur from classes I take at Delta College that remain outstanding by my
sponsoring employer _____. If the financial obligation has
Name of Company
not been fulfilled, a "HOLD" will be placed on my transcript and future registration until the
outstanding balance has been paid.

Classes will not be registered until this form is received.

Student Signature Student Number

Date

Return signed form to:
Delta College Skilled Trades
1961 Delta Road, Office M128
University Center MI 48710
Phone: 989-686-9476
Fax: 989-667-2207