

Office of the College Registrar Leech Lake Tribal College 6945 Little Wolf Road NW Cass Lake, MN 56633 218-335-4222 Revised 4/12/2016

Leech Lake Tribal College Statement of FERPA Understanding: Staff/Faculty

Last Name	First Name
Address	City, State, Zip
individually identifiable information, the disclosure of which i 1974. I acknowledge that I fully understand that the intentional could subject me to criminal and civil penalties imposed by law. also violates the Leech Lake Tribal College's policy and could comy employment regardless of whether	Lake Tribal College, I may have access to records which contain s prohibited by the <i>Family Education Rights and Privacy Act of</i> disclosure by me of this information to any unauthorized person I further acknowledge that such willful or unauthorized disclosure onstitute just cause for disciplinary action including termination of criminal or civil penalties are imposed.
Date	Staff/Faculty Signature