



Office of the Registrar  
MSC 3528  
Harrisonburg, VA 22807  
Phone (540) 568-6281  
Fax (540) 568-5615

### Student Declaration of Dependent Status

Virginia law requires James Madison University to disclose educational records to a (parent) of a dependent student, at the parent's request. For this reason, we need to know the following information:

(Please Print)

Student's Name \_\_\_\_\_  
(Last) (First) (MI)

JMU Student ID # \_\_\_\_\_

Are you claimed as a dependent on a (parent's) tax return?  Yes  No

If so, list the names of the parents who claim you as a dependent:

(Please Print)

Parent's Name \_\_\_\_\_  
(Last) (First) (MI)

(Please Print)

Parent's Name \_\_\_\_\_  
(Last) (First) (MI)

I also grant permission for you to release my educational records to the person(s) listed below:

(Please Print)

Name \_\_\_\_\_  
(Last) (First) (MI)

(Please Print)

Name \_\_\_\_\_  
(Last) (First) (MI)

*Note: Your parent will be required to make the request for information in writing. Generally, we will provide the requested information to your parent within 7-10 business days of the request. You are required to notify us if your status as a dependent changes. In the absence of notification of a change in status, we will continue to regard you as a dependent of, and to release educational records to the person(s) named above.*

Signature

Of Student \_\_\_\_\_ Date \_\_\_\_\_

Daytime

Phone # \_\_\_\_\_

Preferred

Email address \_\_\_\_\_

Office Use Only

Verifier: \_\_\_\_\_

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