



UTE MOUNTAIN UTE TRIBE
DEPARTMENT OF HIGHER EDUCATION
EDUCATION GRANT ADMINISTRATION

CONSENT TO DISCLOSE CONFIDENTIAL STUDENT INFORMATION

Under federal law, when anyone other than you needs to access your education information/status under a college or public agency, your authorized approval is required in advance. The Family Educational Rights and Privacy Act (FERPA, 1974) defines the legal requirements for access to and release of student education records. Student education records include, but are not limited to, course grades, billing information, and progress reports.

Since our grant funders require accountability (for expenses, services, etc.) the Ute Mountain Ute Tribe Higher Education Department collects your personal and income data, obtains your records from partner agencies and institutions, and conveys or shares this information as necessary to ensure our compliance and future support with funders. All gathered information is kept confidential and secure from the public, and is shared only with defined funders, agencies, and affiliates who protect this confidentiality. The types of sharing are as follows:

- Our Bureau of Indian Education and Colorado Department of Education sponsors require student demographic data, proofs of Indian Blood and ID's, test assessments, and achievement information. They utilize student Social Security numbers to analyze aggregate (whole groups of students not individual) levels of accomplishment and job entry, and for statistical and evaluative reports to government. No individual student information ever appears on any of these reports.
- The Ute Mountain Ute Tribe, as governing sovereign and grant-receiving agent, also reserves authority to compile, maintain, and protect records of program clients for statistical and evaluative purposes, and for internal coordination/verification among UMU Tribal agencies, departments, and legal affiliates.
- Discretionary and other grant sponsors (e.g., U.S. Dept. of Education, U.S. Dept. of Health & Human Services, etc.) require demographic, identification (CIB, SSN, etc.), family background, income, training performance, attendance, and/or employment data specific to their requirements and research needs. In general this data is for official grant assessment and auditing purposes. Information is compiled for both aggregate and ('representative') individual profiles but removes all personal identifiers when submitted for publication. No individual student data ever appears on any of these reports, and all funder records are destroyed at the conclusion of the grant study period.

By signing below, you are granting us your permission in two ways: (1) allowing the Ute Mountain Higher Education Department to ask for private information on your behalf relevant to your enrollment in our programs, and (2) allowing the Ute Mountain Higher Education Department to share with specific partners and grantors the data they need to support our programs.

You may choose to deny permission. However, without quick access to your confidential data we may be compelled to delay or nullify your access to some UMUT programs or services. In most cases where a refusal may not otherwise affect your enrollment, you could be required, on your own, to negotiate with institutions, manage billing, etc., as well as gather and submit official data at regular intervals in order to prove your eligibility for assistance. All Tribal programming conforms to federal non-discriminatory policy, specifically:

Equal Opportunity Statement

The Ute Mountain Ute Tribe does not discriminate on the basis of race, ethnicity, color, or religion, national origin, sex, age, sexual orientation, or disability in admissions, or access to, or treatment of, or employment in its educational programs or activities.

Disclosure of Learning Needs

Participants with disabilities have the right to ask for assistance with their learning process. Please meet or contact your Adult Education Coordinator for more information.

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Student Name: _____ DOB: _____
Last First MI

Student's mailing address: _____ City: _____ State: _____

Student's phone (home): _____ (cell): _____ Zip Code: _____

Tribal Census Number: _____
(for identification purposes only)

Having read and understood these guidelines, policies, and conditions related to the disclosure of my private data and identity information with the Ute Mountain Learning Center/UMUT Higher Education department,

I, _____, a student age 18 or older, hereby consent to the release of personally identifiable information from my student record.

OR

I, _____, the parent or guardian of _____
(a student under the age of 18), hereby consent to the release of personally identifiable information from the student record of my son/daughter.

In signing I understand that one purpose of this release is to assist the Ute Mountain Ute Tribe, the Colorado Department of Education (CDE), and/or the Bureau of Indian Education (BIE) in obtaining and reporting information concerning the progress and employment of students (cf. required by section 212 of the 1998 Adult Education and Family Literacy Act). I understand that the student record includes my social security number, which may be disclosed by CDE to the State of Colorado Department of Labor & Employment, and my Certificate of Indian Blood, which may be disclosed by the Ute Mountain Ute Tribe to U.S. Bureau of Indian Affairs.

I understand that my record remains confidential: no other agency or individual apart from the Ute Mountain Ute Tribe, Colorado Department of Education (CDE), U.S. Bureau of Indian Affairs (BIA, BIE), U.S. Dept. of Education, U.S. Dept. of Health and Human Services, or their authorized associates, will have access to this information. The information will be destroyed when the report for which it was used is completed or when the information is no longer needed—whichever comes first.

I also acknowledge and permit the release of information on my enrollment forms, as well as my testing and attendance information, to authorized Colorado agencies and UMU Tribal departments with whom I am engaged and/or contracted.

Government reports generated with my data will result in information and statistics about the employment and educational performance of adult education students in Colorado and students in U.S. Native American grant programs; no specific or personal information about me will appear in these

reports. Official reports about my status to institutions that I willingly designate outside of the Tribe will be restricted to data necessary for my verification or compliance with those agencies.

For purposes of Ute Mountain Tribal interagency or cross-department sharing, I grant permission for the release of information specific ONLY to the nature of my obligations to these agencies or departments, and as they are defined for me in advance. These agencies may include (any or all but not limited to): UMUT Vocational Rehabilitation, Social Services, Human Resources, TERO, WIOA, Substance Abuse/EAP, Temporary Worker, Tribal Courts, and/or BIA Corrections.

Pursuant to these conditions, therefore:

A. I hereby grant permission for the release of my confidential information to the Ute Mountain Ute Tribe Higher Education Department and its authorized partners. I further endow the Department to share my confidential information with its defined institutional partners and grant sponsors. I also understand that this release is only valid for the duration of my enrollment with the Department, following the date signed.

B. Upon their request, please release the following confidential information to the Ute Mountain Ute Tribe Higher Education Department and its authorized affiliates.

- Written (transcripts/verifications/reports/emails)
- Verbal (telephone conversations or person to person)

C. I understand that the following information may be requested and provided to the Ute Mountain Ute Tribe Higher Educations Department, its Scholarship and/or Grant agents, and their affiliates.

- | | |
|----------------------------|-----------------------------------|
| • Grades | • Attendance records |
| • Transcripts | • Correspondence (advisors, etc.) |
| • Progress reports | • Tribal enrollment |
| • Financial Needs Analyses | • Other: _____ |

_____ *By initialing here, I allow the Ute Mountain Learning Center to use photos/video of me, my work or projects, etc., for news and promotional purposes.*

Please direct all correspondence to:

Ute Mountain Ute Tribe
Higher Education Department
P.O. Box 29
Towaoc, CO 81334

Additional inquiries may be directed to:
970-564-5471
sbaker@utemountain.org

Student signature (or authorized guardian if under 18)

Date