

# Marshall University Student Notice of Attorney or Non-Attorney Advisor Representation And FERPA Release

Student or Student Organization Name: \_\_\_\_\_ Case #(s): \_\_\_\_\_

In accordance with Marshall University Board of Governors Policy Nos. GA-1 and SA-1, and Student Disciplinary Procedures, Student-3, all Students or Student Organizations who are accused of a Violation of the Student Code of Conduct or otherwise engage in Prohibited Conduct, who plan to be represented by an attorney or non-attorney advisor must submit this form. This form must be completed and submitted at least 2 business days in advance of any scheduled meeting or hearing to the appropriate University authority. Failure to submit this completed form may result in the loss of the Student's or Student Organization's right to participation of an attorney or non-attorney advisor in the Conduct Procedures.

**I. Attorney or Non-Attorney Advisor Information** \_\_\_\_\_ **Licensed Attorney, Bar #** \_\_\_\_\_  
\_\_\_\_\_ **Non-Attorney Advisor** \_\_\_\_\_

\_\_\_\_\_ Name \_\_\_\_\_ Phone Number \_\_\_\_\_

\_\_\_\_\_ Mailing Address \_\_\_\_\_ Email Address \_\_\_\_\_

**II. FERPA Release (students only; Student Organizations are exempt from this requirement)**  
The Student must initial beside each of the following elections and sign at the bottom of this form to provide valid consent under the Family Educational Rights and Privacy Act (FERPA).

\_\_\_\_\_ I authorize the release of my education records to the above-named attorney or advisor.

\_\_\_\_\_ This authorization will expire upon the conclusion of this case, unless sooner revoked, in writing.

\_\_\_\_\_ This authorization is for the purpose of communication about the above-referenced case.

**III. Certification by Licensed Attorney or Non-Attorney Advisor**  
The attorney or advisor named above must initial and sign below, acknowledging he/she has read in their entirety, understands, and agrees to comply with each of the following documents. Links to these documents may be found at <https://www.marshall.edu/board/board-of-governors-policies/>

\_\_\_\_\_ <https://www.marshall.edu/policies/files/2023/12/MUBOG-GA-3-Discrimination-Harassment-Sexual-Harassment-Sexual-Domestic-Misconduct-Stalking-and-Retaliation-Policy-Including-Title-IX-1.pdf>

\_\_\_\_\_ <https://www.marshall.edu/student-conduct/files/Student-Code-of-Conduct-2023.pdf>

\_\_\_\_\_ <https://www.marshall.edu/titleix/files/2023/08/Student-Disciplinary-Procedures-Approved-8-23.pdf>

\_\_\_\_\_ <https://www.marshall.edu/housing/files/MUResHallGuide.pdf> (if applicable)

### **Attorney or Non-Attorney Advisor Signature**

By signing this form, I acknowledge that I have read, understand, and agree to comply with this form and the above listed documents. I acknowledge that I may fully participate in the Student Disciplinary Procedures, but only to the extent afforded to the Student or Student Organization I represent. Additionally, I understand that I may not delay, disrupt, or otherwise interfere with Student Disciplinary Procedures. I understand that failure to comply with University policies and procedures, including the documents cited above, may result in my removal from the Student Disciplinary Proceedings.

\_\_\_\_\_ Date \_\_\_\_\_  
Licensed Attorney or Non-Attorney Advisor Signature

### **Student or Authorized Student Organization Representative Signature**

By signing this form, I acknowledge and understand that I am giving permission to the above named attorney or non-attorney advisor to fully represent me during the Conduct Proceedings for the case(s) listed above. I also acknowledge that I have read the above listed documents and understand them.

\_\_\_\_\_ MUID \_\_\_\_\_ Date \_\_\_\_\_  
Student/Student Organization Representative Signature