



## FINANCIAL AID INFORMATION RELEASE FORM

Student Name:	Student ID:
Date of Birth:	Last Four Digits of Social Security Number:
Email Address:	Telephone Number:

I understand that my educational and financial aid records are protected under the Family Educational Rights and Privacy Act (FERPA) and that the Office of Financial Aid will not release private information from my records to relatives or other individuals without my written consent (except under subpoena or other provisions of FERPA).

I authorize staff members of the Office of Financial Aid at Virginia Union University to release information in person, over the telephone, or in writing to the individual(s) listed below. It should be noted that the financial aid staff is authorized, even when a release is in effect, to release private information only if the best interests of the student are served by the sharing of information.

Name of Authorized Person: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Authorized Person Date of Birth: \_\_\_\_\_

Name of Authorized Person: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Authorized Person Date of Birth: \_\_\_\_\_

I grant permission under FERPA for sharing information regarding financial aid records with the individual(s) listed above to take effect immediately. My permission will remain in effect until I revoke this permission or my financial aid records are no longer available under applicable record retention regulations. I understand that I may revoke this permission at any time by submitting a signed request to the Office of Financial Aid.

I authorize the release of information regarding:					
Application and Application Data	Yes	No	Disbursement of Aid	Yes	No
Financial Aid Eligibility	Yes	No	Appeals	Yes	No
Financial Aid Awards	Yes	No	Academic Standing for Financial Aid	Yes	No
Charges and Financial Obligations	Yes	No	Special Consideration Requests	Yes	No

The student must present photo identification and sign this release form in person at the Office of Financial Aid.

This form will not be accepted electronically, online, by mail, FAX or other means.

By signing the form, the student is signing that his/her permission is granted freely and not under duress.

Student Signature	Date
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