

2020-2021 CONSENT TO RELEASE

STUDENT INFORMATION

Please PRINT clearly with black/blue ink

Last Name

First Name

M.I

Student ID Number

Financial Aid and Veterans Services

The Family Educational Rights and Privacy Act (FERPA) of 1974 is designed to protect the privacy of a student's educational records. These confidential records include financial aid, scholarship, and student account information, and will not be released without written consent from the student. By signing this form, the student authorizes MSJC personnel to release confidential financial aid information to a designated person(s).

Person to Release Information To:

Full Name: _____

Relationship to Student: _____

Driver's License #: _____

Date of Birth: _____

I understand the person listed on this form must confirm his/her identity in person to have access to my information. **This authority does not include the ability to change or update information on my student file.**

The following information may or may not be disclosed as indicated below:

Disclose	Not to Disclose	
<input type="checkbox"/>	<input type="checkbox"/>	Financial Aid Holds
<input type="checkbox"/>	<input type="checkbox"/>	Financial Aid Disbursement
<input type="checkbox"/>	<input type="checkbox"/>	Financial Aid Application Status
<input type="checkbox"/>	<input type="checkbox"/>	Satisfactory Academic Progress (SAP)
<input type="checkbox"/>	<input type="checkbox"/>	Statement of Responsibility Status
<input type="checkbox"/>	<input type="checkbox"/>	Veteran Standards of Progress

I wish to rescind my 2020-2021 Consent to Release for: _____

***Form expires on
June 30, 2021**

Student's Signature

Date

This document must be completed and turned in to the Financial Aid office via email by the student. Please attach a photocopy of a government issued ID of the person to release information to. The student must provide a photocopy of their MSJC Student ID or a government issued ID.

For Office Use Only

Staff Initials: _____

Date Entered: _____