

## **2013-14 Student Information Release Form Office of Student Financial Assistance**

The Family Education Rights to Privacy Act (FERPA) requires a student's writter consent for Marshall University to release confidential students' records to another party except under limited exceptions cited in FERPA permitting release without consent.
(Print full name of student),
nereby authorize Marshall University's Office of Student Financial Assistance (SFA) to provide specific financial records that may include Financial Aid or the Bursar's Office accounts to the specific parties cited below.
lame of the individual(s) or group(s) I wish to release the information to:
PLEASE PRINT
Spouse:
Nother/Stepmother:
ather/Stepfather:
Other (Must Specify):
Purpose:
acknowledge by my signature that I understand although, I am not required to release my specific records to these individual(s), I am giving my consent to release my aformation. I understand this release remains in effect from the date received by Marshall University's Office of SFA until such time as I revoke it in writing to the Office of SFA. I also understand any such revocation shall not affect disclosures previously made by Marshall University's Office of SFA.
Student's Signature: Date:
Student's Marshall ID number:
Please return to the: Office of Student Financial Assistance Marshall University One John Marshall Dr.

Huntington, WV 25755