

## Office of Financial Aid

### 2011-2012 Financial Aid Information Disclosure Waiver and Authorization Form

Name: \_\_\_\_\_  
Last
First
Student ID#

\*\*\*\*\*  
 The Family Education Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a federal law that protects the right to privacy and confidentiality of student records. Schools must have written permission to release student record information. If you wish to authorize BSU Office of Financial Aid to disclose information to a third party (e.g., parents, siblings, spouse, etc.) for the 2010-2011 academic year, please complete and sign this form.

This form must be submitted to:  
 BSU Office of Financial Aid  
 14000 Jericho Park Road Suite 1100  
 Bowie, MD 20715  
 FAX # 301-860-3549

I hereby authorize BSU to release any financial aid information requested to the individuals named below. I understand that any information concerning my financial aid is protected under FERPA. I further understand that I may waive that protection and give access of my records to the individuals of my choice.

Name (First and Last)	Last 4 digits of SSN	Relationship

This disclosure waiver and authorization form is limited to **financial aid information ONLY** and is granted solely to the individual(s) named above.

- I acknowledge that this release is valid only for the academic year specified on this waiver.
- I understand that I can revoke this release any time by notifying BSU Office of Financial Aid in writing.
- **Please submit a photocopy of your BSU student ID card with this request.**

\_\_\_\_\_  
 Student Signature

\_\_\_\_\_  
 Date

