



# Authorization to Release Financial Aid/ Student Account Data

Student Financial Services

2500 E. Nutwood Ave.  
Fullerton, CA 92831  
(714) 879-3901 x2202  
FAX (714) 681-7421

The Family Educational Rights and Privacy Act (*FERPA*) of 1974 is Federal law designed to protect the privacy of student educational records. Financial aid information and data collected for purposes of completing the Free Application for Federal Student Aid (*FAFSA*) fall under the *FERPA* provision. Institutions must have written authorization to disclose information protected under *FERPA*, except under limited exceptions provided for by *FERPA*. You can obtain more information through the U.S. Department of Education's website: [www.ed.gov/policy/gen/guid/fpco/ferpa/](http://www.ed.gov/policy/gen/guid/fpco/ferpa/).

## Privacy of Information

I, \_\_\_\_\_ authorize Hope International University to discuss information pertaining to my financial aid and/or student account with the following person(s):

- Parent Name of Parent (s) \_\_\_\_\_
- Guardian Name of Guardian \_\_\_\_\_
- Spouse Name of Spouse \_\_\_\_\_
- Other Name(s) \_\_\_\_\_
- None

This authorization will be retained by the Student Financial Services Department for the duration of enrollment. It is the student's responsibility to notify the Student Financial Services Department in writing of any requested changes to this information.

By signing this form, you, the student, certifying that you are granting permission to release your financial aid and/or student account information. This disclosure is valid only for financial aid and student account information.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Signature