

Student Financial Information Release Form

Effective June 1, 2009 The purpose of the Federal Educational Rights and Privacy Act of 1974 is to protect the privacy of information concerning individual students by placing restrictions on the disclosure of information contained in a student's financial records. I understand for the university to release financial records and information related to my financial records, a signed authorization must be on file. Therefore I am filing this release with the Office of Financial Aid, and I understand that this release applies ONLY to records related to my financial activity at the university.

PRINT CLEARLY Therefore I, _____SSN_____

Authorize the PAU University to release financial information to:

Name	Relationship	Last 4 SSN

The above information will be released with my FULL CONSENT.

I understand this release authorization is in effect until I leave PAU or until I submit a written notice to revoke it.

Student Signature

Date

Return Completed Form to:

**Financial Aid Office
1791 Arastradero Road
Palo Alto, CA 94304
OR FAX TO: (650) 433-3897**