

What is the purpose of this form?

The Family Educational Rights & Privacy Act of 1974 as amended, and more commonly known as the Buckley Amendment and contained in the *Code of Federal Regulations (34 CFR 99, subpart D99.30)*, requires a written and dated consent of a student (who is at least 18 years old) before disclosing personally identifiable information from the student's educational records to a third party.

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| <p>F.E.R.P.A. (Family Educational Rights & Privacy Act) Information Release Consent Form</p> |
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I. STUDENT INFORMATION

Name: _____ Student ID: _____

II. AUTHORIZATION FOR DISCLOSURE

I authorize Multnomah Bible College & Biblical Seminary to release information regarding my account as indicated below:

Financial Aid Information (check F below): Federal and institutional financial aid applications, supporting documentation, and award information.

Student Accounts Information (check S below): Account balance, charges and credits, payment plan, third party sponsorship, 1098-T, receipt requests, or questions regarding financial account record.

Please check the appropriate box(es) for each person you wish to have access to the above information on your account. The(se) individual(s) will need to supply your name and social security number before information will be released to them. "

""F ""S _____
Name (First MI Last) Relationship

Specify particular information or indicate "All": _____
""

""F ""S _____
Name (First MI Last) Relationship

Specify particular information or indicate "All": _____
""

""F ""S _____
Name (First MI Last) Relationship

Specify particular information or indicate "All": _____

Of the people listed above, I would like my financial statements sent to:

Name Phone

By Mail: _____
Street Address City State Zip

By Email: _____

The purpose of releasing this information is: _____

III. STUDENT SIGNATURE

I understand that my decision for the release (or non-release) of financial information is voluntary and will be valid during my entire enrollment at Multnomah Bible College & Biblical Seminary. I understand that I must complete a new form in order to add or remove anyone from the list above. I affirm that I have carefully read the foregoing authorization and that I fully understand the meaning and intent of this document. I affirm that I have signed this authorization voluntarily.

Student Signature

Date

Student Accounts Office: 503.251.5343 • Financial Aid Office: 503.251.5335 • Fax: 503.445.5199

White Copy ~ Financial Aid • Yellow Copy ~ Student Accounts