

Division of Student Affairs and Enrollment Management

THIRD PARTY RELEASE TO INDIVIDUAL(S)

Student's Name (please print)

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 University of West Georgia Department of Financial Aid to disclose information to a third party (e.g. parents, siblings, spouse, etc.), please complete and sign this form. Submit this form in person to:

Enrollment Services Center, Parker Hall

*If you are unable to submit this form in person you may fax it with a copy of your Student ID or Driver's License to: 678-839-6439.

I hereby authorize University of West Georgia Department of Financial Aid and/or Enrollment Services Center to release any financial aid information requested to the named individuals 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

Please initial each item:

_____ I understand that the records and information discussed may include, but is not limited to, the types and amounts of financial aid I have been awarded, the requirements to receive my financial aid, and information regarding any Satisfactory Academic Progress warnings or suspensions associated with my account.

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

_____ I understand that I can revoke this release at any time by notifying the University of West Georgia Department of Financial Aid in writing.

A picture ID will be required when submitting this request.

Student's Signature