



**Student Account and Financial Aid Offices**

414 N Meridian #6068  
Newberg OR 97132  
503-554-2300

**STUDENT ACCOUNT AND FINANCIAL AID  
RELEASE OF INFORMATION**

The Family Educational Rights and Privacy Act (FERPA) of 1974 is a federal law designed to protect the privacy of aspects of a student's educational record that are not considered 'directory' information. Educational records include financial aid and student account records which are considered confidential and will not be released without written consent from the student, except to the extent that FERPA authorizes disclosure without consent. For this reason, it is necessary for Student Financial Services at George Fox University (Student Account and Financial Aid Offices) to obtain permission from a student in order to release financial information not excluded by FERPA laws. For a full disclosure regarding FERPA, visit GFU web pages and search for FERPA.

**Include ALL persons to be authorized. Submission of this form revokes all prior authorizations excluding Guarantor(s). To remove a Guarantor(s) contact Student Accounts for instructions.**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Code Word\* \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Code Word\* \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Code Word\* \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Code Word\* \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Code Word\* \_\_\_\_\_

The names and relationships above are intentionally blank.

In accordance with the Federal Education Rights and Privacy Act, I, \_\_\_\_\_, I authorize the release of my financial information to the individuals named above. This release only pertains to my financial records and does not allow the individuals named above, access to information from any other department or office except if it impacts financial aid eligibility and charges. This authorization is in addition to the Guarantor(s) listed on my Student Account Payment Agreement.

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

\_\_\_\_\_  
**Student ID Number**

\_\_\_\_\_  
**Date**

**\*The above authorized person(s) must provide the student's ID number and the Code Word indicated on this form. We reserve the right to ask for additional authenticating information as well.**