



## Scholarship and Financial Aid Office

### Family Educational Rights and Privacy Act (FERPA) Form

This form is **OPTIONAL**. Only complete and return this form if you would like to authorize our office to release your financial aid information to individuals of your choice, including your parents.

The Family Education Rights and Privacy Act (FERPA) is a federal law that gives you the right to inspect and review your financial aid records and education records. For your protection, FERPA limits the release of information about your records without your explicit consent.

#### Student Release of Information

I understand that any and all personally identifiable information concerning my financial aid and education records is protected under FERPA. I further understand that I may waive that protection and give access of my records to individuals of my choice. This release pertains to my financial aid records.

I give the financial aid office permission to release my financial aid records and any related information to the person(s) listed below:

**Full Name (First, MI, Last)**

**Relationship to Student**

---

---

---

---

---

---

---

---

---

---

I acknowledge that this release is valid until I have completed my current degree program at the University of Detroit Mercy (UDM). By signing this release, I authorize UDM's Financial Aid Office to release any financial aid records to the person(s) listed above. I understand that I can revoke this release at any time by notifying the Financial Aid Office in writing.

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Student I.D. Number**

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

\_\_\_\_\_  
**Please Print Name**

*This release is not transferable to any other UDM office or department.*