



**STUDENT RELEASE OF INFORMATION
FOR
FINANCIAL AID AND HOUSING**

The purpose of this form is to implement the Family Educational Rights and Privacy Act (FERPA) at Carroll College while continuing to assist students in appealing their housing contract. This form is to provide the student a means for authorizing the Financial Aid Office to provide personal identifiable information from the student's financial aid records to the Office of Student Life.

I (printed student name) _____,

ID# _____, authorize the Financial Aid Office to talk with the Office of Student Life about my financial aid.

This authorization specifically includes all financial aid received at Carroll College and the Federal FAFSA results.

Please indicate the semester you are appealing: Fall Spring Summer

The following are additional special instructions and/or comments: _____

Date _____ Student Signature _____

Financial Aid Office Use:

2009-10 FAFSA Filed? YES NO

08-09 EFC: _____ 09-10 EFC: _____

Number in Family: _____ Number in College: _____

Total Loan Debt: \$ _____

Comments: _____

See Attached Federal Student Aid Report and Financial Aid History

Financial Aid Office

Date Completed: _____ By: _____