



**FINANCIAL AID INFORMATION RELEASE**

If you would like the financial aid office and/or the Bursar to be able to discuss your financial aid and billing information with anyone such as a parent or spouse, you must complete this form and return it to the financial aid office at Bellin College. Your information will not be shared with anyone other than you if you do not provide a completed release form.

*Please Print*

Student's Name: \_\_\_\_\_

BC ID or Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

I, the undersigned, hereby **approve** Bellin College to release the following student financial aid information to the person/agency listed below

All financial aid information which includes, but is not limited to, types and amounts of awards, tuition balances, tuition billing information, materials missing from my financial aid file, etc.

Bellin College may release information as indicated above to the following individuals/agencies:

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

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

\_\_\_\_\_  
Date Signed

This form will remain valid until revoked or modified in writing, even if you are no longer enrolled at Bellin College. Oral or telephoned revocation will not be accepted. To change the person/agency listed above, please complete a new release form; the most recently received/dated form will be active.

THIS INFORMATION IS RELEASED SUBJECT TO THE CONFIDENTIALITY PROVISIONS OF APPROPRIATE STATE AND FEDERAL LAWS AND REGULATIONS WHICH PROHIBIT ANY FURTHER DISCLOSURE OF THIS INFORMATION WITHOUT THE SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY SUCH REGULATIONS.