

PORTLAND STATE UNIVERSITY

Office of Student Financial Aid

Student's Name: _____ **ID#:** _____
(Please print) Last First

Signature: _____ **Date:** _____

Phone number: _____ **E-mail address:** _____

CONSENT FOR RELEASE OF STUDENT INFORMATION

The Family Educational Rights and Privacy Act (FERPA) of 1974 is a federal law designed to protect the privacy of a students' educational records. Educational records include financial aid records, which are considered confidential and will not be released without written consent from the student. In accordance with FERPA, it is necessary for the Office of Financial Aid at PSU to obtain written consent from the student before releasing any financial aid information.

I hereby grant the PSU Office of Financial Aid to release any information regarding my financial aid and application materials to parties outside the University in accordance with the specifications I have indicated below. I understand that this request does not include the release of any parent tax returns that may be in the file.

I understand this consent for release will remain in effect for the current academic year.

(Students wishing to withdraw this consent may do so in writing.)

Please check the appropriate release, and provide any additional information.

Release to Other Parties

General: I give my consent to release any financial aid information contained within my file to the following party:

PRINT Name and relationship

Specific: I give consent to release the following records and/or information listed below in my financial aid file to the following party:

LIST the specific information and/or items in your financial aid file which you wish to be released

PRINT name and relationship – Party

Unless you specify otherwise, your information will be placed for pick-up at the Financial Aid windows in Neuberger Hall lobby (you must show valid I.D. to pick up your correspondence).

Please mail to the address listed below.

I will pick up at the financial aid front counter. (Have valid I.D.)

PRINT name of Party

Please fax to:

PRINT street address

PRINT name of Party

PRINT city state zip

PRINT FAX Number of Party

PRINT Phone Number of Party

Portland State University
PO Box 851
Portland, OR
97207-0851

Phone: 503-725-3461
Toll Free: 800-547-8887
FAX #: 503-725-5965