

## **Financial Aid Information Release Form**

•		Please use black or blue ink while filling out this form.		
Student Name			LMU ID	
			I return this form if you would like to aut including your parents.	thorize our office to release your financial aid
The Fam	ily Education l	Rights and Privacy A	act (FERPA) limits the release of informatio	n about your records without your explicit
			Student Release of Information	
FERPA. O registrar.	fficial LMU FER Imu.edu. I furtl	PA policies and proce	edures are on the Academic Resource page	al aid and education records is protected under on the Registrar Office's website at https:// s of my records to individuals of my choice. This
l give the	Financial Aid (	Office permission to re	elease my financial records to the person(s)	) listed below:
	Full Name	(First, MI, Last)	Last 4 digits of SS#	Relationship to Student
Г				
L				
	] I do not autho	orize release of my fina	ancial aid information.	
release, I	authorize LMU		to release any financial records to the pers	oyola Marymount Universisty. By signing this son(s) listed above. I understand that I can revoke
Student Signature			Student Name	Date
	<b>the Financial <i>F</i></b> to Friday, 8:00 a	<b>Aid Office:</b> am - 5:00 pm, Pacific T	「ime.	
	ncial Aid Office person on a wal		on der Ahe building, Suite 270 on the 2nd	floor. Financial Aid Counselors are available to
Mail:	LMU Financi 1 LMU Drive		How to Submit this Form:	
	Los Angeles		The Department of Education requires the documents containing personally identified	

Phone: 310.338.2753 Fax: 310.338.2793

\*This release is not transferable to any other LMU office or department information (PII) must be transmitted through secure means. This form cannot be submitted via email. You may mail or fax this form to the address or fax number listed to the left, or you may submit it as a PDF through our Secure Upload page available at financialaid.lmu.edu/upload

For Office Use Only: RRAAREQ - FERPA at C Etrieve - FERPA

FAO Staff Initial\_ Date:\_