



CONSENT TO RELEASE STUDENT INFORMATION

In accordance with the Federal Family Educational Rights and Privacy Act of 1974 (FERPA) (20.U.S.C. 1232g), the Financial Aid Office is prohibited from releasing information regarding a student's financial aid status without written consent of the student. Exceptions to this rule include authorized federal, state, and local educational authorities as set forth in the law.

Therefore, if you wish for the Financial Aid Office to discuss your financial aid status with persons or agencies that are not covered under this law, you should complete, sign and return this *consent to release* form to our office.

Student's Consent to Release Financial Aid Information

I, authorize the Financial Aid Office at Harvard Medical School to discuss information pertaining to my financial aid and/or student account to the following person(s) and /or organization(s):

Person/OrganizationName	Relationship
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

I understand that this release will be in effect for one year from the date of signature and that I may cancel this permission at any time by submitting an additional written statement requesting cancellation.

Student Signature

HUID

Date

Please return to: Financial Aid Office, 25 Shattuck Street RM 211, Boston, MA 02115