FERPA FORM FOR STUDENT’S CONSENT TO RELEASE FINANCIAL AID INFORMATION

The Family Educational Rights and Privacy Act (FERPA) of 1974 is a federal law designed to protect the privacy aspects of a student’s educational record that are not considered ‘directory’ information. In response to the terrorist attacks on the United States that took place on September 11, 2001, Congress made changes to FERPA. Section 507 of the USA Patriot Act amended FERPA, which now contains 16 exceptions to the general rules. Public Law 107-56; DCL April 12, 2002. Methodist University complies with the changes made to FERPA as a result of the USA Patriot Act. Educational records include financial aid and student account records which are considered confidential and will not be released without written consent from the student, except to the extent that FERPA authorizes disclosure without consent. For this reason, it is necessary for the Office of Financial Aid at Methodist University to obtain permission from a student in order to release financial information not excluded by FERPA laws.

FERPA Contact for General Information:
Family Policy Compliance Office
U.S. Department of Education
400 Maryland Ave., S.W.
Washington, DC 20202-4605
Phone: 202-260-3887
Web site address: www.ed.gov/offices/OM/fpco

In accordance with the Federal Education Rights and Privacy Act (FERPA) of 1974, I, ____________________________________________ (please print full name) the undersigned, authorize the release of my financial aid information to the individuals named below. This release pertains only to my financial Records and does not allow the individuals named below access to information from any other department or office except if it impacts financial aid eligibility and charges. I agree to waive my rights under FERPA and allow the below named person(s) access to my financial records effective as of this date forward unless I specify otherwise.

Name ______________________________________    Relationship__________________
Name ______________________________________    Relationship__________________
Name ______________________________________    Relationship__________________

I certify that I have read and understand the Financial Aid Consent for Student Release of Information form.
I also certify that I understand the FERPA form will remain in effect while enrolled at Methodist University unless I provide a revised FERPA form in person to the Office of Financial Aid.

Student Signature _____________________________ * Student ID Number _____________________________ Date ____________

* When calls are received by our office, we are unable to release information without proper identifiers. Callers must provide their name, relationship to student, students name and student ID number in order to be given any information.

Please detach and return the white copy to Methodist University. Retain the yellow copy for your records.
Methodist University
Office of Financial Aid
5400 Ramsey Street
Fayetteville, NC 28311