

**STUDENT FINANCIAL AID  
Release of Information Form  
2008-2009**

**SECTION I: STUDENT INFORMATION**

Student Name: \_\_\_\_\_ BGSU ID #: \_\_\_\_\_  
Last First

BGSU E-mail Address: \_\_\_\_\_ Cell Phone or Local #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Street or P. O. Box City State Zip

**SECTION II: STUDENT PERMISSION TO RELEASE INFORMATION**

**Release of Financial Aid Information**

I, \_\_\_\_\_  
(Please print)

give permission to the Bowling Green State University Student Financial Aid (SFA) office to disclose information concerning my financial aid eligibility to:

\_\_\_\_\_  
(Print name of person or organization)

I understand that this permission is in effect for the 2008-2009 enrollment period and that I must file a new *Release of Financial Aid Eligibility Information* form each year. I may revoke this permission by submitting a written request to SFA, 231 Administration Building, Bowling Green State University, Bowling Green, OH 43403. I also understand that the above individual(s) will not have the power to act on my behalf in the completion of business transactions related to my financial aid eligibility.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date