



Bowling Green State University

Student's Authorization to Release Financial Account Information

The Family Educational Rights and Privacy Act of 1974 (FERPA), and University policy allows Bowling Green State University to disclose information from a student's financial record to designated third persons/parties with the student's written consent. This information may also be disclosed without the student's prior consent when, for example, such disclosure is made to a parent of a dependent student, as defined in Section 152 of the Internal Revenue Code of 1986, as amended. This form affords you the opportunity to give written consent to allow disclosure of information from your financial records to designated third person/parties.

Student's Name
(please print): _____ BGSU ID#: _____

I give my FULL consent to the Office of the Bursar and the Student Financial Aid Office at Bowling Green State University to disclose information from my financial educational records to:

Name: _____ Name: _____

Relationship to Student: _____ Relationship to Student: _____

Address: _____ Address: _____

Phone #: _____ Phone #: _____

By signing this form, I agree that University personnel may provide financial information from my education record, beyond that considered "directory information" to those designated above by me; and that this authorization shall be in effect until revoked by me, in writing, and delivered to the Office of the Bursar or the Student Financial Aid Office as indicated below, but that any such revocation shall not affect disclosures previously made by the University prior to the receipt of any such revocation.

Student's Signature

Date

Return this form to: The Office of the Bursar, 132 Administration Building, 1001 E. Wooster St., Bowling Green, OH 43403-0100 Fax #419-372-7665
The Student Financial Aid Office, 231 Administration Building, 1001 E. Wooster St., Bowling Green, OH 43403-0100 Fax #419-372-0404
BGSU Firelands, Room 103 C Foundation Hall, One University Drive, Huron, OH 44839 Fax #419-372-0880,

Student Revocation
(Cancellation of Authorization)

By signing below, you indicate that you no longer give written consent to disclose information from your financial record to the persons designated above by you. Your parents may, however, continue to access your financial records if you are still a dependent and they declare you as a dependent on their most recent federal income tax form (according to Section 152 of the Internal Revenue Code of 1986, as amended).

Student's Signature

Date

Return this form to: The Office of the Bursar, 132 Administration Building, 1001 E. Wooster St., Bowling Green, OH 43403-0100 Fax #419-372-7665
The Student Financial Aid Office, 231 Administration Building, 1001 E. Wooster St., Bowling Green, OH 43403-0100 Fax #419-372-0404
BGSU Firelands, Room 103 C Foundation Hall, One University Drive, Huron, OH 44839 Fax #419-372-0880

For Office Use Only
Form Info Entered on CSS: (check mark indicates "yes") BY: _____ DATE: _____
Initials of BGSU employee