

Permission to Release Information

In accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974, Manchester University will only disclose confidential information from the students' records to parents or other third parties provided the University has written consent from the student on file. By signing this form, you are authorizing Manchester University to discuss the listed information to the third-party designees below.

	S	tudent Information		
Print: Last name, first name, middle initial			MU ID#	
By sig	gning this form, you are releasing the following Academic Affairs: Academic performance, attended Student Financial Services (SFS): Financial Aid, aid or student account.	ndance, advising and other issues relate		
his/he	the party listed below contacts the Manchester Uer authentication code (last 4 digits of his/her sociantication code, Manchester University will not rele	niversity, he/she will be asked to auther Il security number). If the party is not al		
Third	-party Designee			
1)	Printed Name	Relationship to Student	Authentication Code (Last 4 digits of SSN)	
2)	Printed Name	Relationship to Student	Authentication Code (Last 4 digits of SSN)	
3)	Printed Name	Relationship to Student	Authentication Code (Last 4 digits of SSN)	
4)	Printed Name	Relationship to Student	Authentication Code (Last 4 digits of SSN)	
I unde	erstand that this release is in effect from the date it	Authorization t is received through my enrollment at N	Manchester University.	
I unde	erstand that Manchester University is not obligated	d or required to release information to t	he persons listed above.	
Revers	sal of this consent must be submitted in writing to	the Office of Academic Affairs.		
Studen	nt Signature	 Date		