



RETURN TO:
The Center for Global Education
Attn: Mrs. Schiffer
John Carroll University
20700 North Park Blvd.
University Heights, OH 44118-4581
Telephone 216.397.4320

Permission to Release Financial Information Authorization Form

The Federal Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, protects the privacy of student educational and financial records. Information about your student account (tuition, room, board, payments, etc.) may not be released to or discussed with a third party (*i.e.*, your parents, spouse, sponsor, guardian, etc.) without your written authorization.

To grant specific individuals access to your student account information, please complete this form.

Student Name _____ Banner ID _____
Last First M.I.

I, _____, authorize the release of my John
First Name Last Name

Carroll University student account information to the individual(s) listed below:

Name of Individual	Relationship
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Name of Individual	Relationship
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Student Signature _____ Date _____

THIS AUTHORIZATION PERTAINS TO THE CENTER FOR GLOBAL EDUCATION PERSONEL.
 Requests for information maintained by other offices are not covered by this authorization.

For Office Use Only:

Date Received ____/____/____ By: _____ Semester _____