



Consent to Disclose Bursar Records

I, _____ hereby request and authorize
(Print Name of Student)

The Bursar's Office _____ to disclose to

(insert name of recipient of education records/or class of parties to whom disclosure may be made)

the following educational / financial records (circle all that apply):

- | | |
|----------|----------------------|
| Balances | Charges / Statements |
| Payments | Financial Aid |
| Refunds | All of the above |

For the purpose of:

(indicate purpose)

This disclosure is valid (please check one):

_____ Current Date Only

_____ Current Academic Year 2011/2012

_____ Semester Only (circle one):

Fall 2011 Winter 2011 Spring 2012

Sum 1 2012 Sum 2 2012

I understand that I can also obtain a copy of the above indicated records if I desire.

_____/_____
(Signature of Student) (Date)

ID # _____