The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of student education records. Under FERPA, the disclosure of personally identifiable information from a student’s education records to anyone other than the student is prohibited unless written consent is given by the student. Exceptions to the requirement for written consent include disclosures to school officials with legitimate interest in the student’s information; disclosures to government agencies for audit, evaluation, and enforcement purposes; and disclosures in response to subpoenas or court orders.

Part I: Student Information

Student Name: ___________________________ Student ID: ___________________________
E-Mail: ___________________________ Phone: ___________________________

Part II: Release and Authorization

Financial aid information, which is created and maintained by the Financial Aid Office, is covered under this law. Examples of information related to financial aid that are covered by this act include, but are not limited to, the following:

- Financial aid applications
- Documents used for verification
- Documentation of Lewis & Clark’s professional judgment decisions
- Satisfactory Academic Progress documentation
- Entrance and exit counseling records
- Federal Work-Study payroll records
- Records relating to eligibility and disbursement of federal student aid funds

To release any financial aid information to a third party (including parents and/or spouse), the Financial Aid Office must have written permission from the student.

Please complete and sign the statement below if you wish to authorize Pacific Northwest College of Art to provide financial aid information upon request to the person(s) indicated. You may update or revoke this authorization at any time during the academic year by submitting such a request in writing to the Financial Aid Office. I authorize the Financial Aid Office at PNCA to release information contained in my financial aid file to the following person(s):

Name (please print) ___________________________ Relationship (please print) ___________________________

______________________________ ______________________________

Certification:

I/we certify that the information provided on this form is true and complete to the best of our knowledge. I/we further understand that if I knowingly give false information, I may be subject to disciplinary action by the college, further resulting in cancellation or repayment of disbursed financial aid.

Student’s Signature ___________________________ Date ___________________________