

Student Name	Student ID #
I hereby request that the Wagner College Office of Financial Aid release the following information to the party/parties listed below in accordance with the Family Education Rights and Privacy Act (FERPA).  Person/Agency to have information released to	
Specific records that may be disclose:	
Financial Aid Award Summar	y
Student's Bursar Account His	tory/Balance Owed
Financial Aid History/Eligibil	lity/Disbursements
Student Employment History wages, performance review info	at Wagner College including dates employed, ormation.
Student Tax Information and	or Verification Information
Parent Tax Information and/o	or Verification Information
Entrance/Exit Counseling Info Responsibilities, Stafford Loan	ormation (Loan Borrower Rights & History)
Professional Judgment/Specia	al Circumstance Documentation
Other Specify:	
Student's Signature	Date
Parent's Signature (if applicable)	