

STUDENT INFORMATION RELEASE FORM

SOUTHWESTERN INDIAN POLYTECHNIC INSTITUTE FINANCIAL AID OFFICE

PO BOX 10146 ALBUQUERQUE, NM 87184

505-346-2361, 2344 PHONE 505-346-2369 FAX

I, _____, hereby give consent to Southwestern Indian Polytechnic Institute (SIPI) Financial Aid Office (FAO) to release records and other information covered by the Family Rights and Privacy act of 1974 (FERPA) to the individual(s) listed below. I understand that by signing this form my records and information can be released without my knowledge to the individuals(s) listed below. The individual(s) have access to my information for the _____ academic year. I understand this release cannot exceed one academic year in length.

Student Signature

SIPI ID

Date

The information maintained by SIPI FAO and the status of my financial aid awards may be released to the following individual(s):

Printed Full Name

Relationship to Student

Printed Full Name

Relationship to Student

Printed Full Name

Relationship to Student

The Student must present this form to the SIPI Financial Aid Office with a valid state, federally issued, or SIPI student photo ID. If the form is faxed, mailed, or submitted by someone other than the student it **MUST BE NOTARIZED** in the space to the right.