

**Middlesex Community College  
Financial Aid Office  
Financial Aid Information Release Form**

In compliance with the Family Education Rights and Privacy Act (FERPA) and Middlesex Community College policy, the Financial Aid Office cannot release any information pertaining to a student's record. In order for any information to be released to anyone, other than the student, the student must provide our office with written consent.

Please complete the following information only if you, the student, want to authorize an immediate family member or agency to have access to your student record as related to financial aid. For each person or agency listed below, you acknowledge and understand that you are giving permission to the Financial Aid Office at Middlesex Community College to release all information regarding your financial aid and your eligibility for financial aid.

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Name	Relationship	Birth Date	last 4 digits of Social Security No.
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Name	Relationship	Birth Date	last 4 digits of Social Security No.
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Organization	Contact Person	Telephone Number
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- ❖ I recognize that this release only pertains to the Financial Aid Office and no other department on campus.
- ❖ I understand Middlesex Community College is required by law to report information about me to certain agencies (such as federal and state).
- ❖ I understand this form is valid as long as I am an enrolled student in continuous enrollment at Middlesex Community College. Withdrawing or stopping out from college cancels this authorization.
- ❖ I understand that I may revoke this privilege at any time by submitting a signed written statement to Middlesex Community College's Financial Aid Office.

Student Name: \_\_\_\_\_ ID #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this completed form in person to your campus Financial Aid Office

**Bedford Campus  
Building #9  
First Floor**

**Lowell Campus  
City Building, Room 314**