

Grid for Student ID input

Office of Student Financial Services
P. O. Box 20036 • Houston, TX 77225
(713) 500-3860 phone • (713) 500-3863 fax
https://www.uth.edu/sfs/

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a federal law that protects the privacy of student education records. Financial aid information and data collected for purposes of completing the Free Application for Federal Student Aid (FAFSA) fall under the FERPA provision. Pursuant to FERPA and the FY 18 omnibus spending bill, institutions must have explicit, written authorization to disclose information protected under FERPA.

Students requesting the release of financial aid data necessary to share FAFSA information with scholarship-granting organizations and tribal organizations must complete the Authorization to Release Financial Aid Data form prior to the completion of scholarship applications or release of data.

Students must complete one form per organization.

A. STUDENT INFORMATION

Student Last Name First Name Middle Initial

B. AUTHORIZATION OF DESINGNEE

I, _____, hereby authorize and request the Office of Student Financial Services at UTHealth, servicing all the component schools, to release 2018-2019 financial and/or FAFSA data that is necessary to grant a scholarship award to the entity specified below:

- Scholarship Organization: (Organization Name)
Tribal Organization: (Organization Name)

C. CERTIFICATION AND SIGNATURE

By signing this request, you, the student, certify that you are granting the Office of Student Financial Services permission to release your financial aid and/or FAFSA data to the authorized organization indicated above.

This disclosure is valid only for financial aid information that is necessary to grant a scholarship award for the award year specified above.

Student Signature (no electronic signatures accepted) Date

Students may upload the signed form as "FA Miscellaneous Form" using the myUTH document upload feature.