



Aid Year: \_\_\_\_\_

**Release of Information**  
Office of Student Financial Aid | Florida Atlantic University

Submit this form online via [owfiles.fau.edu](http://owfiles.fau.edu)  
Need Help? Visit [fau.edu/finaid/contact](http://fau.edu/finaid/contact)

Student Name \_\_\_\_\_

Student Z Number \_\_\_\_\_

- Complete this form if, for any of the following reasons:**
- You are requesting your Financial Aid file to be transferred to another FAU partner campus.
  - You are requesting a copy of a document from your Financial Aid file.
  - You are requesting a document that is related to your parent/guardian. (Parent/guardian MUST also sign this form.)
  - You are requesting a document that pertains to tax information. (Please visit [irs.gov](http://irs.gov) to get a tax return transcript to submit along with this form.) *The Financial aid office will not release any tax information once submitted.*

**I hereby authorize the FAU Office of Student Financial Aid to release the following information:**

**Reason for Disclosure:**

**Method of Delivery** (Choose one):

Pickup In Person on Date: \_\_\_\_\_

Receive By Mail To:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian Signature (if necessary) \_\_\_\_\_

Date \_\_\_\_\_