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**Authorization for Release of Information**

Family Educational Rights and Privacy Act (FERPA)

I, the undersigned agree that under the Family Educational Rights and Privacy Act (FERPA) - (20 U.S.C. § 1232g; 34 CFR Part 99), authorized officials of (University/College) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_’s  Financial Aid and/or Registrar’s Offices are permitted to disclose financial aid status, grades, grade point average, major course of study, class enrollment and academic standing information from my education records to the Chuck Cooper Foundation Scholarship Committee.  (§99.31(a)(4)).  This approval will remain active for each Academic Year that I am a student at the University until written notification to withdraw consent is submitted by me.

Name (print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature                                                                                                         Date