

**Everett Community College  
STUDENT FINANCIAL SERVICES**

**RELEASE OF CONFIDENTIAL INFORMATION**

Academic year of 2010-2011

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

I, \_\_\_\_\_ SS# \_\_\_\_\_

Give Everett Community College - Financial Aid office permission to release my financial aid information to:

\_\_\_\_\_  
(Name) (Relationship)

\_\_\_\_\_  
(Name) (Relationship)

\_\_\_\_\_  
(Name) (Relationship)

All Financial Aid Information

Specific Information

Specify: \_\_\_\_\_

I understand that I am signing a release of information that is valid only for the academic year of 2010-2011.

\_\_\_\_\_  
Signature

\*\*\*\*\*

Office Use Only:

Completed (initial/date) \_\_\_\_\_

Additional Info Needed: \_\_\_\_\_

Everett Community College does not discriminate on the basis of race, religion, creed, color, national origin, age, sex, marital status, disability, or veteran status.