

Click to Print



# Financial Aid & Scholarships

UCSC Student's ID /Account Number (Do not use CRUZ ID)

UCSC Student's Last Name

First Name

## 2025-26 OUTSIDE SCHOLARSHIP AGENCY AUTHORIZATION TO RELEASE INFORMATION

The Family Education Rights and Privacy Act (FERPA) is a federal law that protects the privacy and confidentiality of student records. Schools must obtain written permission to release student record information.

If you wish to authorize the UC Santa Cruz Financial Aid & Scholarship Office to disclose FAFSA/Dream Application data to a designated scholarship agency including information related to your expected family contribution and awards, you must complete this form. However, the income information provided on your financial aid application will **ONLY be discussed with the parent(s) who completes the financial aid application** and not the agency listed below.

I, \_\_\_\_\_, do hereby authorize the scholarship agency named below to receive information about financial aid such as expected family contribution, awards offered and cost of attendance. I understand that income and asset information reported on the financial aid application will NOT be shared with any individual other than the parent on the financial aid application. This is effective until I am no longer enrolled at UCSC or I notify the Financial Aid and Scholarship Office that I would like this revoked.

Provide the agency's contact information below. Requests will **ONLY** be processed to the agency's phone and/or e-mail provided here.

### Information may be released to:

Name \_\_\_\_\_ Agency \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### Authorized by:

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_