

SOCIAL SECURITY NUMBER			
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MPC STUDENT'S ID NUMBE	R		

2022—2023 Student Authorization For Access by Designee

Use ink only.	Designee	
Last Name	 First Name	
L'ast iname	riist ivaille	MI
dents at an institution of higher educ information from their parents, guare Student Financial Services may not d	ation to control outside access to their dians, or others as designated by the str isclose information from a student's ec ding release to allow Student Financia	called the Buckley Amendment, allows stu- educational records, including requests for udent. Without a student's written consent, ducational records to outside third parties. al Services to disclose information from
There can only be one designee p of student's and designee's offi		d in person, by student, with a copy
Student Financial Services mamanner chosen below. I under	, hereby declare that y release information to the followstand that I must provide the deper to gain access to information	owing designee and only in the esignee with my Student ID number.
Designee's Name:		
Designee's E-mail:		
Designee's last 4 digits of SSN	: Phone #:	
Please indicate the relationship	of the designee:	
Parent Spouse	GuardianOther: Please indica	ate relationship:
Please indicate the access level	granted:	
student either by email, telephone an	d/or in-person) nal (grants designee the right to provice)	umentation and/or verbal information for de and receive verbal information only,
I understand that this release is in eff	ect until the end of the academic year,	or if revoked in writing by me, the student.
Student's Signature		Date