

## Waiver for the release of information

(Written permission must be granted by the student in order for the Office of Student Accounts to discuss the student invoice or financial account with any third party, including parents or guardians.)

I hereby give permission to the Office of Student Accounts to discuss matters related to my student invoice:

**Name (Please print):** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

I understand that this agreement to release information will be in effect only for the current academic year. If I choose to waive my right to privacy during the next academic year, I will have to submit another waiver to the Office of Student Accounts.

**Student Signature:** \_\_\_\_\_

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