



RELEASE AUTHORIZATION FOR EDUCATION RECORDS AND INFORMATION

I, _____, voluntarily authorize The Citadel to release the information from my education record, as follows:

1. Items of information to be released (check all that apply):

Billing information, including statements, charges, credits, payments, past due amounts, and/or collection activity

Disciplinary information, including the results of any honor trial or disciplinary hearing or board where I was the accused

Financial Aid information, including awards, application data, disbursements, eligibility, and/or financial aid satisfactory academic progress status

Grades/GPA, demographic, registration, CWID number, academic progress status, and/or enrollment information

Loan disbursement information, as maintained by The Citadel, excluding Stafford and PLUS loans, including billing and repayment history (including credit reporting history), communication history, balances, and/or collection activity

Other / limitations on the above: _____

2. Purpose for which the records are to be released: _____

3. The information may only be released to the following persons or entities (must be filled in):

4. If for single use, check here: ___

I hereby grant authorization to The Citadel to release my above referenced education records to the parties listed on this form. I understand that unless marked for "Single use" this release is effective until revoked by me, by signed request to The Citadel.

STUDENT'S SIGNATURE

CWID

DATE

Company/Unit