

Student Last Name: _____

Student First Name: _____

Student AU ID #: _____

2026-2027 FERPA Authorization

To One-Stop Student Services Center,

I, _____ (student's first & last name), hereby authorize the One-Stop Student Services Center to speak with:

Person's name #1: _____ Relationship to student: _____

Person's name #2: _____ Relationship to student: _____

Person's name #3: _____ Relationship to student: _____

Regarding all information directly related to my account as it pertains to the One-Stop Student Services Center, including but not limited to aid eligibility, billing, payments, tuition, fees, etc. This **excludes** academic information, such as GPA, scholarship cancellation/renewal, etc.

I acknowledge that I may submit a subsequent notification in writing directly to the One-Stop Student Services Center to no longer release information to any or all of the individuals listed above.

Thank you,

Student signature: _____ Date of completion: _____

Parent name (Print): _____ Parent signature: _____

(If student is dependent)