**INFORMATION RELEASE:**

1. **I authorize** the Financial Aid Office to release information to outside agencies that need financial aid data to determine my eligibility for funding.

2. **I authorize** the Financial Aid Office and the Business Services Office to release my financial aid and student billing/payment information to another person or persons (such as a parent or spouse). Indicate below the name(s) and your relationship to the person(s) to whom you want information released.

3. **I understand** that my information release will remain in effect until June 30, 2022 or until I submit a written notice canceling or changing the person or persons to whom information is released.

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<tr>
<th>Name</th>
<th>Relationship</th>
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**AUTHORIZED TO CREDIT YOUR ACCOUNT:**

1. If I receive financial aid funds, I understand NTC will apply those funds directly to my tuition, fees and/or room and board charges for the current academic year. I will use Federal Title IV financial assistance received only for expenses related to my study at NTC.

2. I also authorize NTC to credit my Federal Title IV funds to my other miscellaneous educational charges such as bookstore charges, late fees, up to $200 of unpaid prior year charges, etc. Authorization is voluntary and I may rescind this request in writing at the NTC FAO at any time. If I answer “NO”, I must use other means for paying all miscellaneous charges.

   YES [ ]  NO [ ]

**CERTIFICATION:**

I understand that my information release will remain in effect until June 30, 2022 or until I submit a written notice canceling or changing the person or persons to whom information is released. I also understand that my authorization to credit my account will remain in effect unless I submit a written notice requesting that it be canceled.

__________________________________________________________________________  ________________
Student Signature *(please sign in ink)*                                        Date