



Financial Aid

For Office Use Only:	
Checklist Item:	9EXTP
COMMKEY	9EXTP

Permission to Release Information

I _____
Student Name – Please Print
Stony Brook ID

give the Financial Aid Office at Stony Brook University, permission to release information to the agency listed below for the purpose of assessing scholarship eligibility.

The following types of information may be disclosed:

Financial Information (financial aid awards and FAFSA related data)

Enrollment Information

Academic Information (GPA, academic progress)

You may release the information designated by the check boxes above to the agencies, or people designated below:

Student Signature
Date

Print and sign this form before submitting, electronic signatures are not acceptable
For secure and faster processing, submit this form via the 'Upload Process' located on your SOLAR To Do List
 Or
 Mail or fax all documents to:

Office of Financial Aid and Scholarship Services
 Stony Brook Union, Suite 208
 Stony Brook, NY 11794-3252
 phone 631-632-6840 fax 631-632-9525