Macalester College personnel CANNOT provide specific account information to anyone (including borrower’s family: Spouse, Mother, Father, Grandparents) unless the borrower signs a release indicating to whom Macalester may release information.

Print Borrower’s Full Name:

Account Number: 735-07 – _______ _______ _______ _______ _______ _______ _______ (Macalester Student ID Number)

Family Education Rights and Privacy Act (FERPA):
Sec. 99.30
a) The eligible student/borrower shall provide a signed and dated written consent before an education agency or institution discloses personally identifiable information from the student’s education/loan records.
b) The written consent must – 1) Specify the records that may be disclosed; 2) State the purpose of the disclosure; and 3) Identify the party or class of parties to whom the disclosure may be made.

Authority: 20 U.S.C. 21232g (b)(1) and (b)(2)(A)

I, ______________________________________________ authorize Macalester College to release (Please print borrower’s name) information on my Macalester College Loan, being billed by University Accounting Service (UAS), to:

___________________________________________________________________
(Print Recipient Name) (Print Relationship)

___________________________________________________________________
(Print Recipient Name) (Print Relationship)

___________________________________________________________________
(Print Recipient Name) (Print Relationship)

I would like to release the following information to my recipient(s):
(Please check all boxes that apply)

☐ All Account Information
☐ Deferment/Cancellation – deferment/cancellation dates or amounts.
☐ Due Amounts – balance, past due, pay-in-full, canceled amount, etc…
☐ Account Status – enrolled, grace, repayment, deferred, paid-in-full
☐ Collection Status – suspended, third party collection, pending assignment, assigned.
☐ Payment Information – payment received date, amount, distribution, etc…

This authorization will remain in effect until revoked by the borrower in writing.

__________________________________________ ________________________
(Borrower’s Signature) (Date)

This authorization must be completely filled out and signed before it can take effect.

Macalester College
Loan and Collection Office
1600 Grand Avenue
Saint Paul, MN  55105
(651)696-6578