

Stern Graduate Financial Aid 44 West 4th Street, Suite 6-155 New York, NY 10012

P: 212-998-0790

fin-aid@stern.nyu.edu

INFORMATION RELEASE REQUEST AUTHORIZATION FORM

Student Na	ıme:	t Last	Unive	rsity ID: N		
	FIRS	t Last				
THE STUD	ENT REQUESTS	S THE FOLLOWING: (ch	eck one)			
	Complete the at	tached form.				
	Statement itemizing the student's financial aid and cost of attendance. (Students may print current aid year award letters (on NYU letterhead), which include the cost of attendance, directly from their Albert Student Center by navigating to the award page.)					
For acad	demic year:	Fall/Spring □	Fall only □	Spring only	Summer only □	
<u>PROCESSI</u>	NG: (processing	time is within 7-10 busin	ess days)			
		ent at permanent address Albert Student Center an			nent address is	
	Email to the student at their Stern email address.					
	Mail to the follow	wing agency:			· · · · · · · · · · · · · · · · · · ·	
	Fax to the follow	ving agency:				
	Email to the follo	owing agency:				
	Complete online	e form from the following	agency:			
		at the Stern Graduate F it will be mailed to your p		(KMC 6-140). If ite	em is not retrieved	
<u>AUTHORIZ</u>	ATION:					
above office		rsity to release informatio gencies, or programs. I use indicated.				
Student sign	nature:		Da	ite:		

NOTE: Electronic signatures are not accepted. Signature should match the signature on your legal form of ID (driver's license, passport, etc.).