



**Financial Aid Office**  
Colston Hall, Room 504  
P: 718.289.5700  
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Bronx Community College  
Of The City University of New York  
2155 University Avenue  
Bronx, New York 10453

**2022-2023**  
**Financial Aid FERPA Authorization Form**

The Family Education Rights and Privacy Act (FERPA) of 1976, as amended and contained in the Code of Federal Regulations (34 CFS 99, subpart D99.30), requires a written and dated consent from any student (18 years of age or older) before disclosing personal identifiable information from the student's educational/financial records to a third party. Under the Family Education Rights and Privacy Act (FERPA), the Financial Aid & Scholarships Office reserves the right to withhold financial information from a third party.

**Student Information**

XXX – XX-			
Last Name	First Name	Last 4 Digits of Social Security Number	EMPILD #
Address (include apt. #)		City	State
			Zip Code
Date of Birth	E -mail Address		Phone Number (include area code)

**Section A: Information Release Consent (This form must be submitted in person by the student)**

I authorize Bronx Community College Financial Aid & Scholarships Office personnel to release any and all financial aid information to the individuals listed below. The third party will need to provide my name, last four digits of my social security number, and my date of birth before any information will be released. I also understand only limited information will be released over the phone.

Name	Relationship to BCC Student	Create a 4 DIGIT Pin # *

\* We will request this # before we release any information

**Section B: Student Signature**

I understand my decision for the release of Financial Aid information will be valid only during the 2022-2023 academic year at Bronx Community College. Student must physically sign and **digital signature not accepted.**

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE:**

- This form **must** be submitted in person or uploaded to CUNYFirst by the student.
- If form **uploaded** to CUNYFirst, student **please email us at financialaid@bcc.cuny.edu** to inform us.
- A third party must be indicated on this form before any financial aid information will be released.
- The third party must know the student's name, last four digits of the student's social security, and date of birth. Only limited information will be given over the telephone regardless if the FERPA authorization form is submitted to the Financial Aid & Scholarships Office.

**PLEASE RETURN OR UPLOAD TO CUNYFIRST THIS FORM FOR BRONX COMMUNITY COLLEGE FINANCIAL AID OFFICE.**