



Lansing Community College  
1121 – Enrollment Services  
Room 203, Gannon Building  
PO Box 40010  
Lansing, MI 48901-7210  
Phone: (517) 483-1200  
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## Release of Information 2007-2008 Award Year

*Use this form to designate an individual to receive information regarding your Financial Aid account at Lansing Community College.*

Student Name: \_\_\_\_\_ LCC Student #: \_\_\_\_\_

I grant \_\_\_\_\_ the ability to receive information regarding my Financial Aid account at Lansing Community College for the 2007-2008 Award Year.

I understand the following:

- Only information pertinent to my Financial Aid account at Lansing Community College will be released;
- Information will only be released for Fall Semester 2007, Spring Semester 2008 and Summer Semester 2008;
- I must submit a new Release of Information each Award Year that I wish to authorize the above named individual to receive information; and
- Information given via telephone is limited due to FERPA (Family Educational Rights and Privacy Act) regulations.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of designee: \_\_\_\_\_ Date: \_\_\_\_\_