Lansing Community College
1121 – Financial Aid Office
Room 203, Gannon Building
PO Box 40010
Lansing, MI 48901-7210
Phone: (517) 483-1200 (option 2)
Fax: (517) 483-1170

Release of Information

2008-2009 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 2008-2009 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 2008, Spring Semester 2009 and Summer Semester 2009;
- 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: _____

For Office Use Only	Revised 04/01/2008
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