



## Financial Information Request Form

By completing this form, **all** monthly student account statements and semester invoices will be sent directly to your home address or any other address specified below. This will also allow Cedarville University to release financial information to the authorized individual(s).

In accordance with the Family Educational Rights and Privacy Act (FERPA), Cedarville University is committed to protecting the rights of students who are attending, or who have attended the University. One area covered by FERPA is your right to privacy regarding your financial information. However, you may consent to release financial information to another individual by completing the lower portion of the form and returning it to the Cashiers Office. This form will be on file in the Cashiers Office so that the third party may also obtain financial information over the telephone.

If you do not sign and return this form, all statements and invoices will be sent directly to your campus post office box, and we will **not** release any of your financial information to anyone (including parents).

Please complete the information below and return it to:

**Cedarville University**  
**Cashiers Office**  
**251 N. Main St.**  
**Cedarville, OH 45314**  
**(937) 766-7830**  
*e-mail: cashier@cedarville.edu*

I hereby give Cedarville University permission to release financial information to the following individual(s):

*(Please Print)*

\_\_\_\_\_  
Student name

\_\_\_\_\_  
Name/relationship

\_\_\_\_\_  
ID number (see invoice)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
City State Zip

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### FOR OFFICE USE ONLY

Entered by \_\_\_\_\_ Date \_\_\_\_\_