



El Camino College (ECC) - 16007 Crenshaw Blvd. ♦ Torrance, CA 90506 ☎ 1-310-660- 3493 ♦ www.elcamino.edu
ECC Compton Center (COM) - 1111 E. Artesia Blvd., E-17 ♦ Compton, CA 90221 ☎ 1-310-900-1600 x 2935 ♦ www.compton.edu

THIRD PARTY RELEASE FORM
TELEPHONE AND IN-PERSON

The Family Educational Rights and Privacy Act of 1974 (FERPA) prohibits agencies and educational institutions from releasing confidential information about a student without the student’s consent unless he or she is releasing that information to provide financial and award information to federal, state, and campus personnel who have a legitimate need to know this information.

STUDENT SECTION

PRINT ALL INFORMATION NEATLY IN BLACK OR BLUE INK.

El Camino College Student ID Number
Last Name First Name MI Telephone Number

I hereby authorize the Financial Aid Office to release information concerning my financial aid file to by telephone and in-person. I understand that I must present to the Financial Aid Office my original El Camino College Student ID, California Driver’s License, or California ID Card to make this request.

Person Authorized to Receive Information (Please Print) Date
Student Signature Date

OFFICE SECTION
Do not write below this line. – For office use only.

Student’s Form of Identification (Check one box):

ECC ID CA Driver’s License CA ID Card

Date of Expiration:
Verified by: Financial Aid Staff Signature

Document Released: Staff: Date
Document Released: Staff: Date
Document Released: Staff: Date

Student Signature to Rescind Request Date