



Release Information to Parent/Spouse/Third Party

Student Name: _____

UMID: _____

I give UM-Flint Cashiers/Student Accounts permission to release information regarding my student account to:

Parent: _____

Spouse: _____

Third Party: _____

_____ for current semester only

_____ for as long as I am a student

I understand that Cashiers/Student Accounts will only release information regarding my student account record. This does not authorize them to discuss my academic records, registration or financial aid.

Signed: _____
Student Signature

Date: _____