



RIDER
UNIVERSITY

Office of Financial Aid
2083 Lawrenceville Road
Lawrenceville, NJ 08648-3099
T 609-896-5360
onestop@rider.edu
www.rider.edu

RIDER UNIVERSITY
ONESTOP SERVICES
BURSAR'S OFFICE
OFFICE OF FINANCIAL AID

PERMISSION TO RELEASE INFORMATION

I, _____, give One Stop Services, Office of Financial Aid, at Rider University, permission to discuss my financial aid and circumstances with _____.

This person is my _____.
(Relationship to student)

This permission is granted from _____ to _____.
(Month/Day/Year) (Month/Day/Year)

(Or earlier if I inform One Stop Services, Office of Financial Aid, in writing)

Student's Signature: _____ Date: _____

Rider Bronc ID #: _____

Please return this form to:

Rider University
Office of Financial Aid
2083 Lawrenceville Road
Lawrenceville, NJ 08648
Telephone #: 609-896-5360
Fax#: 609-219-4487
E-Mail: onestop@rider.edu