



UTAH

A Program of Utah Association for the Education of Young Children

Release/Sharing of information

I, the undersigned, do hereby authorize the exchange of information regarding my financial status and/or that of my family's, in order that I may be considered for financial assistance from TEACH Early Childhood® UTAH, a program of UAEYC. I further authorize the release of information pertaining to my scholastic achievement, if required, to determine my continued eligibility. By signing below, I also acknowledge that I may be required to complete a release form and/or other documentation required by Utah's higher education institutions in order to ensure the right to exchange information with TEACH Early Childhood® UTAH.

TEACH Early Childhood ® Utah and...

College/University name _____

By signing below, I permit the following information to be shared with TEACH Early Childhood® UTAH:

- Student Number
- Accuplacer Scores
- Grades
- Transcripts
- Residency Status
- Outstanding financial obligations
- Status of current financial aid award

_____ Student Name Printed	_____ Signature	_____ Date
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_____ UAEYC Representative	_____ Signature	_____ Date
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Student ID number _____