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In accordance with the confidentiality protection of the Internal Revenue Code (IRC) and subject to [26 U.S.C. §6103\(l\)\(13\)](#) of the IRC requirements, [20 U.S.C. § 1232g](#); and [34 CFR Part 99](#), institutions of higher education must have the applicant's express written consent to disclose federal tax information (FTI) that may contain personally identifiable information (PII) to a scholarship-granting organization, including tribal organizations, or to an organization assisting the applicant in applying for and receiving federal, state, local or tribal assistance, that is designated by the applicant to assist in applying for and receiving financial assistance for any component of the applicant's cost of attendance.

Applicants and any applicable contributor(s) must submit an **Informed Consent Disclosure** to authorize consent for the Office of Student Financial Services to disclose federal tax information, including redisclosure of FTI, from their Free Application for Federal Student Aid (FAFSA) to the parties identified by the applicant to assist the applicant in applying for and receiving assistance.

Individuals permitted *Delegated Access* to a student's education records (academic and personal records relating to scholastic, disciplinary and fiscal matters) with respect to the Family Education Rights and Privacy Act (FERPA) are not allowed access to FTI.

Institutions are prohibited from disclosing or redisclosing FTI for any other purpose, even with the applicant's consent. On request, institutions will provide an applicant with an Institutional Student Information Record (ISIR) containing FTI. The applicant may redisclose their own FTI at their discretion.

INSTRUCTIONS

1. Complete **one form per organization**.
2. Disclosure period is only valid for one FAFSA cycle per academic year (e.g. 2024-2025).
3. The student and any contributors for the FAFSA cycle must complete and sign this application.
4. Upload completed form(s) to myUTH.

DISCLOSURE

The information being disclosed includes tax return information disclosed under [section 6103\(l\)\(13\) of title 26](#) with respect to the applicant and may only be used for the purposes stated.

Organization Name _____ Purpose for Consent _____ Disclosure Period _____

PRIVACY NOTICE AND TERMS FOR ORGANIZATIONS

Any entity receiving information from an institution of higher education with the applicant's express written consent shall not sell, share, or otherwise use applicant information other than for the express purpose for which consent was granted by the applicant. Inappropriate use, unauthorized disclosure or redisclosure of FTI are subject to criminal penalties punishable under the Internal Revenue Code (IRC).

CONSENT

I We, in accordance with [section 6103\(l\)\(13\) of title 26](#), grant the Office of Student Financial Services at UTHealth, servicing all component schools, express written consent to disclose to the designated organizations the information contained in this disclosure, including Federal Tax Information (FTI) that has been transferred to the Free Application for Federal Student Aid (FAFSA) for the period of disclosure specified above. Granting such consent, equally applies to the following, as applicable:

1. The information may only be used for the purpose(s) stated;
2. Withdrawal of consent from any party constitutes the non-disclosure of information to the organization indicated;
3. Responsibility to notify the designated organization of the privacy and terms related to the disclosed information remains that of the applicant; however, a copy of this disclosure may be provided to the designated organization at the institution's discretion.
4. The applicant may request a copy of the Institutional Student Aid Record containing FTI whereas the applicant may redisclose the information at their discretion; and
5. An electronic copy of this consent form will be maintained, in accordance with record keeping requirements, which may be requested by the applicant.

Applicant Name _____ Applicant Signature _____ Date _____

Contributor Name _____ Contributor Signature _____ Date _____

Contributor Name _____ Contributor Signature _____ Date _____