

## Information Release Form

Aspire Servicing Center is committed to ensuring your privacy and maintaining your loan records in a secure manner. As required by law, we will not disclose any information pertaining to your loan records to anyone but you, your co-signer or endorser (if applicable), the references you provided, and those we are required to share information with such as your school(s), lender(s), guarantor(s), Department of Education and each of their agents.

Therefore, we require your written consent to discuss your education loan information with anyone else. If you would like to authorize someone to discuss your specific loan information with us, please complete this form and return it by fax to 515-471-3980 or by mail to Aspire Servicing Center, P.O. Box 659705, West Des Moines, IA 50265-0970. For faster processing, securely upload the application and required documentation through your online account at <https://portal.studentloan.org>.

### Borrower Information

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Borrower Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Borrower Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
\_\_\_\_\_ Email Address: \_\_\_\_\_

### Authorized Individual

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**Complete this section to allow an individual access to your education loan records.** *You must complete a separate Information Release Form for each individual or institution that you consent to allow access to your education loan records.*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
\_\_\_\_\_ Email Address: \_\_\_\_\_

### Authorized Institution / Organization

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**Complete this section to allow an Institution/Organization access to your education loan records.** *You must complete a separate Information Release Form for each individual or institution that you consent to allow access to your education loan records.*

Institution / Organization: \_\_\_\_\_ Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ Title: \_\_\_\_\_  
\_\_\_\_\_ Telephone #: \_\_\_\_\_

### Authorization Acknowledgment

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By signing below, I authorize Aspire Servicing Center to reveal written or verbal information on my education loan(s) to the individual or institution/organization listed above.

\_\_\_\_\_  
Borrower Signature

\_\_\_\_\_  
Date