

I, _____ (*insert employee's printed name*), hereby permit
MRP- _____, (*insert Agency name and program*) to contact
_____ (*insert name of loan institution(s)*),
to obtain financial information concerning my student loan(s). I further understand that this
release will grant the above named Agency and Program my permission to contact the above
loan institution(s) for each year that I receive this benefit. I understand that the reason for
such contact is to obtain financial information concerning my student loan(s) for the
subsequent year(s) that the Agency will be making loan repayments to the above loan
institution(s).

Employee's Signature

Date