

NEW MEXICO RURAL REHABILITATION CORPORATION

Office located at:
917 Alvarado Dr. NE
Albuquerque, NM 87108

Mailing Address:
P.O. Box 81554
Albuquerque, NM 87198-1554



Phone: 505-256-7649
Fax: 505-266-4960
e-mail: info@NMRuralRehab.com
Web: www.NMRuralRehab.com

Information Release Form

Date: _____ Account #: _____

Borrower: _____ Guarantor: _____

In order to protect your privacy, we do not provide **ANY** information to anyone other than you or your guarantor regarding this loan unless we receive written authorization from you instructing us to release the information to a designated person(s). (Please note: Your guarantor and/or his/her designated representative(s) has full access to information regarding the loan(s) he/she guarantees.)

If you wish a spouse, parent or any other person to be able to contact our office on your behalf to obtain **ANY** information about your loan, you must provide us with the name(s) and information that would allow us to be able to verify their identity by phone. **You must complete and return this form to our office** if you want someone other than you or your guarantor to have access to this information. You may choose to check the line instructing NMRRC to release no information except to you or your guarantor. The form must be signed and dated to be valid.

Thank you in advance for your cooperation in this matter.

New Mexico Rural Rehabilitation Corporation

To New Mexico Rural Rehabilitation Corporation

I authorize New Mexico Rural Rehabilitation Corporation to release information regarding my student loan to the following person(s) on my behalf: **(do not list the guarantor or yourself)**

Name	Relationship to Borrower	Social Security Number	Birth Date

The information that you provide is for identification purposes only.

DO NOT RELEASE ANY INFORMATION TO ANYONE EXCEPT ME OR MY GUARANTOR

I understand I may change this information in writing by contacting NMRRC at the above address.

Signature: _____ Date: _____

THIS FORM DOES NOT NEED TO BE NOTARIZED