



Information Release Form

Higher Education Servicing Corporation (HESC) 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 (817) 792-7878 or by mail to 4381 W. Green Oaks Blvd., Suite 200, Arlington, TX 76016-4452.

Borrower Information	
Borrower Name:	Account Number:
Borrower Address:	Telephone #:
	Email Address:
Authorized Individual	
•	tess to your education loan records. You must complete a separate ution that you consent to allow access to your education loan records.
Name:	Relationship:
Address:	Telephone #:
	Email Address:
•	ganization access to your education loan records. You must complete a or institution that you consent to allow access to your education loan records.
Institution / Organization:	Contact:
Address:	Title:
	Telephone #:
Authorization Acknowledgement	
"I authorize Higher Education Servicing Corporation individual or institution/organization listed above."	(HESC) to reveal written or verbal information on my education loan(s) to the
Borrower Signature	Date