

**Housing Information Release Agreement**

I, the undersigned, hereby authorize the University of Wisconsin-Madison Division of Housing or Edgewood College (whichever is applicable) to release information to Apex Property Management, Inc., regarding my dorm rent payment history. This authorization expires six months after the date below.

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**Signature**

**Date**

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**Printed Name**

**Student ID #**

**Financial Aid Information Release Form**

I, the undersigned, authorize The Sprague Company LLC to obtain information concerning my financial aid at the University of Wisconsin-Madison, Edgewood College or MATC (whichever is applicable). This authorization expires six months after the date below.

Student Name: \_\_\_\_\_ Social Sec. #: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Student ID #: \_\_\_\_\_

Approximate Amount Received: \$\_\_\_\_\_ Year of aid: \_\_\_\_\_ to \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_