

**Office of Financial Aid**

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**Friedland Family Goldman Gives Scholarship –  
Release of Information Form**

Dear Services for Students with Disabilities office,

I have applied for the Friedland Family Goldman Gives Scholarship through Ross Financial Aid. The Friedland Family Goldman Gives Scholarship was created in 2018 with intents to assist full time Ross Undergraduate student that is diagnosed with a Language-based Learning Disability at Ross – University of Michigan – Ann Arbor.

In order to qualify I must be registered with Services for Students with Disabilities, as a student diagnose with either Language-based Learning Disability.

I \_\_\_\_\_, give Ross Financial Aid Office permission to request information regarding my diagnosis from Services for Students with Disabilities. By signing below, I give Services for Students with Disabilities permission to release information regarding my diagnosis to Ross Financial Aid for purposes of applying for Friedland Family Goldman Gives Scholarship.

Signature \_\_\_\_\_

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

Printed Name \_\_\_\_\_

UMID# \_\_\_\_\_