

Cal Grant GPA Information Release Form

Complete this form and return it to your high school counselor so the school will release your GPA information to the California Student Aid Commission for Cal Grant award consideration. Students submitting a Cal Grant GPA Information Release form must also file a Free Application for Federal Student Aid (FAFSA) or California Dream Act Application (Dream Act Application). The Cal Grant filing period is October 1 – March 2. Apply online at www.fafsa.ed.gov for FAFSA applicants and <https://dream.csac.ca.gov/> for California Dream Act applicants.

DO NOT SEND THIS FORM TO THE CALIFORNIA STUDENT AID COMMISSION

<p>1. Student's Social Security Number (SSN)</p> <div style="border: 1px solid black; width: 150px; height: 25px; margin: 5px 0;"></div> <p>3. Please print your last name</p> <div style="border: 1px solid black; width: 300px; height: 25px; margin: 5px 0;"></div> <p>4. Please print your first name and middle initial</p> <div style="border: 1px solid black; width: 150px; height: 25px; margin: 5px 0;"></div> <p>6. Please print your permanent mailing address</p> <p>Number and Street</p> <div style="border: 1px solid black; width: 400px; height: 25px; margin: 5px 0;"></div> <p>City</p> <div style="border: 1px solid black; width: 200px; height: 25px; margin: 5px 0;"></div> <p>State</p> <div style="border: 1px solid black; width: 30px; height: 25px; margin: 5px 0;"></div> <p>ZIP</p> <div style="border: 1px solid black; width: 50px; height: 25px; margin: 5px 0;"></div> <p>7. Please print your Date of Birth (MM DD YYYY)</p> <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; width: 30px; height: 25px;"></div><div style="border: 1px solid black; width: 30px; height: 25px;"></div><div style="border: 1px solid black; width: 60px; height: 25px;"></div></div> <p>8. Please print your email address</p> <div style="border: 1px solid black; width: 400px; height: 25px; margin: 5px 0;"></div>	<p>Did you obtain this SSN through the Deferred Action for Childhood Arrivals (DACA) program?</p> <p>Question#2 → Yes No</p> <p>Your Gender (fill in bubble)</p> <p>Question#5 → Male Female</p>
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By signing this release form, I authorize the release of my high school Cal Grant GPA information and SSN (if applicable) to the California Student Aid Commission, for use in the Cal Grant application process.

Student Signature

Student Phone Number

Date

I am the parent or legal guardian of the above named minor, and I authorize the release of this minor's high school GPA information and social security number (if applicable) to the California Student Aid Commission for use in the Cal Grant application process.

Parent/Legal Guardian Signature

Parent Phone Number

Date

Print Parent Name

Parent email address

Please visit www.csac.ca.gov/privacy.asp for the California Student Aid Commission's privacy statement.

For School Use Only

SSID (if applicable)

School Student ID

GPA

School Code

Grad Date

G-28 (07/16)