



**NORTH CAROLINA
STATE EDUCATION ASSISTANCE AUTHORITY**

Guaranty Agency and Repayment Services
P.O. Box 41903
Raleigh, NC 27629
Telephone 919-248-4617 or 800-544-1644

THIRD PARTY AUTHORIZATION FORM

Name: _____ Date: _____

Account Number or SSN: _____

I hereby authorize _____ to speak with the North Carolina State Education Assistance Authority (NCSEAA) regarding my student loan account. This authorization will remain in effect unless revoked in writing by me or the authorized third party for as long as my account remains with NCSEAA.

I understand that it is my responsibility to communicate with the 3rd party to make sure I receive information discussed.

Borrower Name (Please print): _____

Borrower Signature: _____

Authorized Third Party Name (Please print): _____

Authorized Third Party Phone Number: _____