



HUALAPAI HOUSING

Hwal'bay Ba:j Wayo:wo'jo

Higher Education Rental Assistance Program

600 Highview Street ♦ P.O. Box 130 ♦ Peach Springs, Arizona 86434

Phone (928) 769-2274 Fax (928) 769-2703

Email: Mariesa Sullivan ♦ MSullivan@Hualapai-nsn.gov



Authorization for Release of Information

I, _____ authorize the Hualapai Education Department, Department of Economic Security, the educational institute listed on this application and other local agencies (i.e. Hualapai Enrollment office, Indian Health Services) to release only pertinent information or documents that are directly related to achieving and maintaining eligibility as stated in the policies and on the attached checklist. Information shall only be released to:

HUALAPAI HOUSING

Higher Education Rental Assistance Program

P.O. Box 130

Peach Springs, AZ 86434

Fax: (928) 769-2703

I understand that all obtained information will be kept confidential and used only for the purpose of this application and rental assistance.

Student Signature: _____ Date: _____