

Authorization for Release of Information

Participant	(s) Name:			
Address:				
_	Street Address	City	State	Zip
Social Security Number:		Date of Birth:		

Release and Signature

- I. I hereby authorize all appropriate agencies to release and exchange information with the Sisseton-Wahpeton Oyate Homebuyers Program.
- II. I understand the SWO Homebuyers Program is a partnering entity of T Yamni, the Sisseton-Wahpeton Oyate One-Stop Homeownership Program and agree this information be used for services offered by T Yamni.

Participant Consent: This consent for release of information remains in effect until services are no longer requested. This authorization is voluntary and remains in effect unless specifically revoked by written notice to the agency or person. Any information released prior to my written revocation of this authorization shall not be a breach of confidentiality. A photocopy of the release is as effective as the original.

Signature

Date

SWO Tribal Council Motion No. 31, dated June 2, 2010: "...to amend the SWO Homebuyers Down Payment Assistance Program to include a release that would allow the lender to notify the SWO Homebuyers Program if a program participant becomes thirty (30) days or more delinquent in their mortgage payments."