



INTERN INFORMATION RELEASE

I hereby authorize any person, educational institution, or company I have listed as a reference on my Intern Application to disclose in good faith any information they may have regarding my qualifications and fitness for internship. I will hold ACTS FFI, any former employers, educational institutions, and any other persons giving references free of liability for the exchange of this information and any other reasonable and necessary information incident to the scholarship process.

Print Name: _____

Signed: _____

Date: _____