ONE-STOP FINANCIAL SERVICES

Title IV Authorization Release Form Non-Institutional Charges and Prior Year Charges

Name: _____ Please Print

Last

CAL STATE

CIN: _____

Authorization to Apply Federal Financial Aid to Non-Institutional Charges

First

Federal student financial aid can only cover "institutional charges" as defined by the U.S. Department of Education. This definition includes current year charges for tuition and fees, and on-campus room and board. It also includes other fees such as university mandatory fees. Unless authorization is received, federal financial aid cannot be used to cover non-institutional charges such as: 30 Day Loans, Writing Proficiency Exam, or any charges not directly tied to taking a class. The only way federal student aid funds can be used to pay for "non-institutional charges" is to obtain your written authorization to pay those charges. This form will allow Student Financial Services to apply your federal financial aid to your non-institutional charges.

I authorize California State University, Los Angeles, to apply my federal student financial aid to any noninstitutional charges on my student account.

I understand that this authorization will remain in effect until I submit a written request to cancel this authorization. I understand that I will be responsible for paying any outstanding debts to California State University, Los Angeles; if I cancel this authorization.

Student Signature: _____

Date: _____

Authorization to Apply Federal Financial Aid to Prior-Year Charges

Federal student financial aid can only cover the current academic year institutional charges as defined by the U.S. Department of Education. Therefore, in order to pay prior year charges with your current academic year's financial aid (up to a maximum of \$200.00), you must provide written authorization for the University to do so. If you have enough financial aid to cover your current year charges and have excess financial aid that you would like to apply to pay a prior year balance due on your student account, you may do so by completing this authorization form and returning it to Student Financial Services.

I authorize California State University, Los Angeles to apply my federal student financial aid to pay my prior year charges within the limits as defined by federal regulations (maximum \$200.00).

I understand that this authorization will remain in effect until I submit a written request to cancel this authorization. I understand that I will be responsible for paying any outstanding debts to California State University, Los Angeles; if I cancel this authorization.

Student Signature: _____

Deliver in person to:

One-Stop Financial Services Student Services Building #2380 5151 State University Drive Los Angeles, CA 90032

Office Use Only:

Type of Identification:

Date Verified: _____

Verified by:

Employee name

Date: