AUTHORIZATION AND APPLICATION OF TITLE IV FUNDS

Student Name ___________________________ ID Number ___________________________
(Please print full name)

To give your authorization, please check the box(es) below.

STUDENT

☐ If I receive federal Title IV funds that are in excess of my tuition, fees, and housing (if applicable), I want these funds applied to my account for books, and other non-institutional charges billed to my account for the period of my federal student loan. This authorization applies to each semester/term that I am enrolled, from this date forward.

☐ I authorize the use of Title IV funds that are in excess of my current term education costs, to pay for any outstanding institutional charges incurred during the current academic year.

Student Signature ___________________________ Date ___________________________

PARENT

☐ If I apply for, and receive, the parent PLUS loan, my signature below authorizes application of Title IV funds to the student’s account. I authorize this loan to cover tuition, fees, housing, and other non-institutional charges billed to the account during the period of the federal student loan. This authorization applies to each semester the student is enrolled, from this date forward.

☐ In addition, I authorize funds that are in excess of current term costs, to pay any outstanding institutional charges incurred during the current academic year.

Parent Signature ___________________________ Date ___________________________

Please note: The permission given in this form does not expire, however, either the student or the parent may rescind this authorization at any time by notifying the Student Accounts Office in writing.

Please return to: University of La Verne/Office of Student Accounts, 1950 Third Street, La Verne, CA 91750 or Fax form to (909) 392-2830