



Financial Aid Authorization Form 2016-2017

Name _____ Student ID# (LoLA #) _____

Home Phone _____ Cell Phone _____ Work Phone _____

Section A. Important Financial Aid Information

_____ I understand that the Office of Financial Aid will communicate with me via email and I also understand that it is my responsibility to check my CLTCC email regularly as well as the email address I entered on my FAFSA. I understand that if I DO NOT wish to receive my Financial Aid communications and award notifications via email, I may submit a request in writing to the campus Financial Aid administrator.

By My Signature Below:

- I acknowledge and understand that if I resign from CLTCC, either officially or unofficially, before completing more than 60% of the semester, I will owe money to the Federal Aid programs and CLTCC.
- I have read and understood the CLTCC Policy for Financial Aid Satisfactory Academic Progress, or SAP (available online at www.cltcc.edu, or you may request a copy from the Financial Aid office). I understand that I must comply with this policy in order to maintain eligibility for Federal Financial Aid.
- I understand that dropping courses or resigning from the college may affect my financial aid eligibility. It is my responsibility to check with the Office of Financial Aid prior to dropping courses or resigning from the college.
- I understand that the Office of Financial Aid may, at any time, verify the information that I submit on my Federal Financial aid application and that any errors and/or conflicting information discovered during the process of verification must be corrected. I certify that I will allow the CLTCC Office of Financial Aid to make the necessary corrections to my FAFSA if required.
- I understand that I may not receive Title IV aid at two schools at the same time. I certify that I am not receiving federal aid at another school while receiving aid at CLTCC.

Signature _____

Date _____

Section B. Authorizations

CLTCC uses a system of applying awards to the charges of eligible students. CLTCC **automatically** applies Title IV awards to tuition and fees. The student may authorize CLTCC to apply Title IV awards to other educational charges incurred, such as books, parking tickets, prior semester balances, prior year balances (up to \$200.00), etc. If the student account has a credit balance, CLTCC will pay the credit balance to the student in accordance with the CLTCC refund policy.

By my signature below, I authorize CLTCC to apply my federal funds to pay for non-institutional charges, such as books, parking tickets, parking permits, etc.

Signature: _____

Date _____

By my signature below, I authorize CLTCC to apply my Federal funds to other educational charges such as prior semester balances (from same award year), miscellaneous fees and prior year charges (up to \$200.00)

Signature: _____

Date _____

This authorization will remain in effect for each subsequent payment period unless you withdraw it. This authorization may be withdrawn at any time by providing a written request to the campus Financial Aid Administrator.



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