

PAINÉ COLLEGE

Office of Financial Aid
1235 Fifteenth Street Augusta, GA 30901-3182

Telephone: 706-821-8262 1-800-476-7703
Fax: 706-821-8691

TITLE IV AUTHORIZATION FORM

The Higher Education Act requires that Title IV funds are to be used to pay for authorized charges in the form of tuition, mandatory fees, and room and board as assessed by the institution. Title IV funds include: Federal Pell Grants, Federal Supplemental Educational Opportunity Grants, TEACH Grants Perkins Loans, Federal Direct Stafford Loans, and Federal Direct PLUS Loans. Fees assessed by the institution such as library fines, parking fees, security fees for housing, and late fees are not authorized charges for which Title IV funds can be automatically applied. Students can authorize the College to apply Title IV credit balances to non-authorized charges.

(1) PRIOR TERM CHARGES AUTHORIZATION

Yes, I authorize any Title IV fund credit balance to pay minor outstanding College charges that I have incurred during prior years, not to exceed \$200.

No, I do not authorize any Title IV fund credit balance to pay minor outstanding College charges that I have incurred during prior years.

(2) CURRENT TERM CHARGES AUTHORIZATION

Yes, I authorize Paine College to apply any applicable Title IV credit balance to pay any current institutional charges that I incur, such as, but not limited to, parking, health, lab, and late fees.

No, I do not authorize Paine College to apply any applicable Title IV credit balance to pay any current institutional charges that I incur, such as, but not limited to parking, library, and late fees.

(3) CREDIT BALANCE AUTHORIZATION

Yes, I authorize Paine College to hold any excess Title IV funds on my account to pay for charges incurred within the academic year in which the credit balance occurred to include the next semester's tuition and fees. I understand that, by selecting yes, any credit balance will remain on my account until requested or until the end of the financial aid award year.

No, I do not authorize Paine College to hold any excess Title IV funds on my account to pay for future charges incurred within the academic year in which the credit balance occurred. I understand that, by selecting no, any credit balance remaining on my account after current semester charges have been satisfied will be refunded. I further understand that a financial hold will be placed on my account for any outstanding balance preventing future course registration/drops or transcript releases until the account is paid in full. Late fees will be assessed.

I acknowledge that these authorizations are voluntary and are valid for the entire period of enrollment. At any time I can cancel my authorizations by completing a new Title IV Authorization Form and submitting it to the Financial Aid Office.

Student Name (PRINT) _____ Student ID # _____

Student Signature _____ Date _____