

# SIMPSON COLLEGE



## Authorization Form

Student Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

This authorization form allows you to tell Simpson College how you would like the school to manage a credit balance created on your student account by Federal Student Aid (FSA) funds.

An FSA credit balance results when the total of FSA funds credited to a student's account exceed tuition, room, board and other eligible charges. An FSA credit balance may be created by these types of aid:

- Federal Pell Grant
- Federal SEOG
- Federal TEACH Grant
- Federal Direct Stafford Loan
- Federal Direct PLUS Loan
- Federal Perkins Loan

Unless a student or parent (in the case of a Parent PLUS Loan) authorizes the college to hold a credit balance, the credit must be paid to the student or parent no later than 14 calendar days after the credit was created.

Signing this form authorizes Simpson College to retain an FSA credit balance on the student account. This authorization will remain in effect for each subsequent payment period unless you withdraw it. An FSA credit balance will only be held on the student account until the end of the last payment period for which the funds were awarded.

This authorization is rescindable at any time by sending written notice to the Simpson College office of financial assistance. If you withdraw your authorization, Simpson College will deliver any remaining credit balance to the student or parent within 14 days.

*I authorize Simpson College to retain any FSA credit balance on my account as described above. It is understood that any interest earned by Simpson College is nominal and will be retained by the College.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Miscellaneous Charges Authorization

Simpson College must obtain authorization before applying any FSA funds on the student's account to cover miscellaneous charges including phone, books, and parking fees.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office of Admissions and Financial Assistance