LYNN UNIVERSITY | STUDENT FINANCIAL SERVICES

AUTHORIZATION REGARDING CREDIT ON ACCOUNT 2014-2015

NAME: _____ ID#: _____

(Last) (First)

DATE: _____

If I have minor prior year charges of $200 or less, I authorize Lynn University to use my current year Title IV funds to pay them. I voluntarily authorize Lynn University to maintain the excess of my Title IV funds on my student account to cover future charges.

If I have other allowable charges other than tuition, fees, room and board, I authorize Lynn University to use my current student financial aid funds to pay for them.

I understand that this amount will not earn interest on my account.

I understand that if I don't maintain continuous enrollment and have a credit balance on my account for longer than three months that the excess will be returned to the lender, if applicable.
I also understand that if I receive a scholarship, personal information such as my major, G.P.A., and any other information may be released to a third party.

I understand that if my financial aid does not come in for any reason or cover the full amount due on my student account, I will be held responsible for any balance owed. I authorize the use of the estimated credit on my student account to purchase textbooks and school supplies at the Lynn University bookstore.

I UNDERSTAND THAT I CAN RESCIND THIS AUTHORIZATION AT ANY TIME IN WRITING.

By signing this form I certify that I will use federal and/or state student financial aid only to pay the cost of attending an institution of higher education. I also certify that I am not in default on a federal student loan or have made satisfactory arrangements to repay it and do not owe money back on a federal student grant or have made satisfactory arrangements to repay it. I also certify that I have read and understand the "Financial Assistance Handbook at Lynn University". You can view this online at www.lynn.edu/financialaidhandbook.

When requesting a refund, please complete a Refund Request Form at the Office of Student Financial Services.

_____ _____

Student Signature

Parent Signature required for Plus Loan (Parent who has applied for the loan)

Please return this form to:

Office of Student Financial Services
Lynn University
3601 N. Military Trail
Boca Raton, FL 33431
Fax number: (561) 237-7189

PROCESSING OF ANY FINANCIAL PROGRAMS MAY BE DELAYED WITHOUT THE RETURN OF THIS FORM TO THE OFFICE OF STUDENT FINANCIAL SERVICES

4/3/2014