



# Title IV Authorization Form

**Student's First Name**

**Initial (optional)**

**Last Name**

**Please select the group based on the first letter of your last name**

A-C

D-J

K-R

S-Z

**Student ID#** (Usually L followed by 8 numbers)

**Primary Email Address** (example@example.com)

**Phone**

## NON-INSTITUTIONAL CHARGES

Delgado automatically applies Pell Grant, SEOG, Direct Subsidized or Unsubsidized loans (Title IV aid) to Institutional Charges (tuition, fees, and books). The student may authorize Delgado to apply Title IV aid for Non-institutional charges (Parking Tickets, Fitness Center Fees, Library finds) incurred.

**I authorize (accept) Delgado Community College to use my Pell Grant, SEOG, Direct Subsidized or Unsubsidized loans (Title IV aid) to pay for non-institutional charges (Parking Tickets, Fitness Center Fees, Library finds).**

**I do not authorize (decline) Delgado Community College to use my Pell Grant, SEOG, Direct Subsidized or Unsubsidized loans (Title IV aid) to pay for non-institutional charges (Parking Tickets, Fitness Center Fees, Library finds).**

## PRIOR TERM CHARGES

Students may authorize the use of Pell Grant, SEOG, Direct Subsidized or Unsubsidized loans (Title IV aid) funds to pay prior term expenses that are related to non-institutional charges (Parking Tickets, Fitness Center Fees, Library finds), not exceeding \$200.00.

**I authorize (accept) Delgado Community College to pay Prior Term Non-institutional charges (Parking Tickets, Fitness Center Fees, Library finds) with my Pell Grant, SEOG, Direct Subsidized or Unsubsidized loans (Title IV aid).**

**I do not authorize (decline) Delgado Community College to pay Prior Term Non-institutional charges (Parking Tickets, Fitness Center Fees, Library finds) with my Pell Grant, SEOG, Direct Subsidized or Unsubsidized loans (Title IV aid).**

*Delgado Community College will disburse any remaining credit balance on Title IV loan by the end of the loan period and any other remaining federal student aid program funds by the end of the last payment period in the award year for which they were awarded.*

*I understand that The Office of Student Financial Assistance communicates with me via email and I understand it is my responsibility to read my Delgado email regularly as well as the email address that I provided on my FAFSA. I also understand that if I DO NOT wish to receive Financial Aid communications and award notifications via email, I MUST submit a request in writing to The Office of Student Financial Assistance.*

*I understand that I may revoke any individual item or all of these authorizations at any time by submitting my request in writing to the Office of Student Financial Assistance.*

**Signature**