

Excess Title IV Funds Usage Authorization Form

Student Name: _____

Student ID: _____

Purpose of this Form

Federal regulations require the University to only apply credits from Title IV funds to certain qualifying charges.

Title IV funds include:

- | | |
|-----------------|----------------|
| *Pell Grants | *TRIO Grants |
| *Stafford Loans | *Perkins Loans |
| *PLUS Loan | *SEOG |

Qualifying charges include only the following:

- *Tuition
- *Student fees
- *Room and board costs billed by the University.

If your total of Title IV funds exceeds the total of these qualifying charges, the University must refund that excess to you unless you give permission to do otherwise.

This means that even if you have other non-qualifying charges (i.e., library fees, parking fees, internet charges, short term loan repayment, etc.), the University will issue you a refund check and you will also still owe on your University student account for the non-qualifying charges.

To prevent this, you may give the University authorization to use the amount of Title IV funds that exceeds qualifying charges to cover the non-qualifying charges. You can use the form below to provide the University with this authorization.

Title IV Funds Usage Authorization

Please indicate your authorization preference below, sign and date this form, and return it to:

Student Accounting
Washington University in St. Louis
Campus Box 1147
700 Rosedale Avenue
St. Louis, Missouri 63112-1408
Fax (314) 935-4347

Your authorization will remain in effect for the entire time you are enrolled at Washington University. You may change your authorization anytime you wish by resubmitting this form.

_____ I **do** authorize Washington University to use the excess of my Title IV funds over my qualifying charges to cover non-qualifying charges that have been billed to my student account.

_____ I **do not** authorize Washington University to use the excess of my Title IV funds over my qualifying charges to cover non-qualifying charges that have been billed to my student account. I understand that if I choose this option, I will be responsible for paying any remaining balance on my student account resulting from non-qualifying charges.

Student Printed Name: _____

Student Signature: _____

Date: _____