

## COLUMBIA INTERNATIONAL UNIVERSITY

STUDENT FINANCIAL SERVICES • PO BOX 3122 • COLUMBIA, SC 29203-3122 • 1-800-777-2227 EXT 5036

### AUTHORIZATION TO APPLY FINANCIAL AID FUNDS

COLUMBIA INTERNATIONAL UNIVERSITY

FINANCIAL AID OFFICE

P.O. Box 3122 ● COLUMBIA, S.C. 29230 ● 1-800-777-2227, 3036

Federal regulations require Columbia International University to inform you about the way in which financial aid funds will be applied to your student account. These same regulations require Columbia International University to obtain your written permission authorizing the use of your financial aid funds in this manner. **In order for us to process your request for financial aid, you must read and sign the following statement. You must return this signed statement to our office as soon as possible.**

#### ***I understand the following:***

- Columbia International University will process my request for financial aid.
- All financial aid funds for which I am eligible will be credited to my student account at Columbia International University.
- I authorize Columbia International University to use the financial aid funds for which I am eligible to pay the current charges for all educationally-related expenses that will be applied to my student account. These charges may include (but are not limited to) tuition, fees, on-campus room and board, and all other direct fees associated with my program of study.
- If I have an *excess credit balance (my financial aid awards exceeded the charges applied to my account)*, I may request a release of those funds at any time from the Accounting Office. I will not earn any interest on funds that will be maintained on my student account.
- If I leave a credit balance on my student account, it will be used to pay for subsequent charges that I may be assessed as a result of my studies at Columbia International University.
- I have the right to rescind any or all of this authorization at any time. I understand that, in rescinding this authorization, I will be billed separately for all subsequent charges associated with my studies and those charges will be immediately payable in cash.

\_\_\_\_\_  
*Student's Full Name (please print)*

\_\_\_\_\_  
*Student's Social Security Number*

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Today's Date*

**PLEASE RETURN THIS SIGNED STATEMENT TO OUR OFFICE AS SOON AS POSSIBLE.**