



Phone: 202-319-5300 • Fax: 202-319-5831 • E-Mail: cua-enrollmentservices@cua.edu

PARENT TITLE IV FINANCIAL AID CREDIT AUTHORIZATION FORM

Federal regulations permit The Catholic University of America to apply a credit from Federal Title IV financial aid funds to a student's account for:

Current term/year charges related to:

Tuition

Student Fees

Room and board costs (as contracted by the student with the University)

Title IV financial aid funds include:

Pell Grants

Supplemental Education Opportunity Grants (SEOG)

Afghanistan Service (IAS) Grant

Direct Stafford Loans

Direct PLUS Loans

Under Federal law, if the total of Title IV financial aid funds exceeds the total of the allowable charges listed above, **the University must refund the excess Direct PLUS Loans to you unless you give the University permission** to apply the excess funds to other educationally related charges (e.g. health insurance fees, health center charges, University penalties, and other miscellaneous charges).

To permit the University to apply these excess funds to other current year educationally related charges, you must provide this signed authorization form to the Office of Enrollment Services prior to the processing of your refund. If a signed authorization form is not received by the day your refund is processed any excess Title IV financial aid (Direct PLUS Loan) funds will be refunded to you.

This authorization is **voluntary**. However, if you do not grant authorization, your Title IV financial aid (Direct PLUS Loan) cannot be used to pay for charges other than tuition, fees, room and board. In all cases, any outstanding balance on your son/daughter's account is your son/daughter's responsibility, including any late charges that may be assessed for payments not received by the applicable deadline.

This authorization may be rescinded at any time in person at the Office of Enrollment Services during normal business hours. Once the authorization is signed it is valid until rescinded.

I understand this is a voluntary authorization and is valid from the date of signing through the date of graduation. At any time I may cancel this authorization in person in the Office of Enrollment Services during normal business hours. I further understand my son/daughter will be responsible for paying any outstanding debts/charges at The Catholic University of America.

____ I authorize The Catholic University of America to apply any excess of my Federal Title IV financial aid, Direct PLUS Loan (after payment of tuition, fees, room and board, as applicable) to other educationally related charges (e.g. health insurance fees, health center charges, University penalties, and other miscellaneous charges), incurred to my child's account for the current term/year.

Student Name (print) _____ CUA ID#: _____

Parent Signature _____ Date: _____