



## Parent PLUS Federal Aid Authorization Form

Florida Polytechnic University disburses Federal PLUS funds to your student account in order to apply those funds to your tuition and fees. If the funds received exceed your current charges, you may authorize Florida Polytechnic University to either return the credit balance to you or the student. Please refer to your financial aid award letter as a guide to your financial planning.

### USE OF FUNDS AUTHORIZATION:

\_\_\_ I **authorize** Florida Polytechnic University to apply Federal PLUS funds to all charges on my student account for the academic year for which the Federal PLUS funds are received.

### EXCESS FUNDS RETURN AUTHORIZATION:

Please select **only one** option below.

\_\_\_ I **authorize** Florida Polytechnic University to **return to the student** any Federal PLUS funds on my account in excess of my current charges at the completion of any semester and that this authorization will remain in effect until I submit a written request to rescind it.

\_\_\_ I **authorize** Florida Polytechnic University to **return to the parent** (at the address below under acknowledgement) any Federal PLUS funds on my account in excess of my current charges at the completion of any semester and that this authorization will remain in effect until I submit a written request to rescind it.

### ACKNOWLEDGEMENT:

*I understand that this authorization is voluntary and will remain valid as long as I am enrolled at Florida Polytechnic University. At any time during my period of enrollment I may rescind or change any of the above authorizations by contacting The Office of Financial Aid.*

Student Name (printed): \_\_\_\_\_ Poly ID: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Borrower/Parent Name (printed): \_\_\_\_\_ Date: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Borrower/Parent Signature: \_\_\_\_\_