

Student Name: _____

Florida Polytechnic University

Office of Financial Aid Admissions Center 4700 Research Way Lakeland, FL 33805-8531 financialaid@floridapoly.edu

FL Poly ID: _____

AUTHORIZATION TO APPLY FINANCIAL AID TO HOUSING CHARGES

By signing below, you authorize Florida Polytechnic University (the "University") to disburse your awarded financial aid funds directly to a third-party corporation, Vestcor, for housing charges that you owe to Vestcor. The University and Vestcor are separate entities. Your financial aid will be applied to University charges first, including tuition and fees. Remaining financial aid balances will be paid to Vestcor to be applied to your housing charges. Any financial aid remaining after those disbursements will be refunded to you. You are responsible for any amount owed to the University or Vestcor after all your financial aid has been disbursed. If you do not sign this form, the University will not disburse any financial aid directly to Vestcor.

By signing below, you also authorize the University to release information related to your financial aid, and any other information necessary to disburse your awarded financial aid, to Vestcor and its employees and contractors.

Term:	Phone Number:
Email Address:	
Student Signature	Date
For Office Use	
Staff	Date
Approved Denied	