

UNIVERSITY OF NORTH CAROLINA SCHOOL OF THE ARTS

NAME _____ E-Z Arts ID _____

Complete this form and submit to:

UNCSA, Office of Student Financial Aid, 1533 South Main Street, Winston-Salem, NC 27127.

I understand these are voluntary authorizations that will be in effect throughout my enrollment at UNCSA.

However, I understand I may modify or rescind these authorizations with a written request at any time by submitting a new form to the Office of Student Financial Aid.

Section I - Authorization to Release Confidential Information

Due to the Family Educational Rights and Privacy Act (FERPA), the Office of Student Financial Aid cannot release information about a student to anyone without the student's permission. Please indicate your preference below:

_____ **I give permission** to the Office of Student Financial Aid to discuss any and all matters concerning my financial aid application and all related documents, awards, and payments with the person(s) listed below, if they provide the following password: _____. Please provide a single-word password. **This password must be presented in order to receive information.**

	<u>Name</u>	<u>Relationship to Student</u>
(1)	_____	_____
(2)	_____	_____
(3)	_____	_____

_____ **I do not give permission** to discuss my financial aid information with anyone.

Student signature

Date

Section II - Authorization to Pay Miscellaneous Other Charges with Financial Aid Funds

Federal regulations require the Office of Student Financial Aid to obtain authorization before the UNCSA can deduct certain expenses from your federal financial aid funds. These funds include Pell Grants, FSEOG, Perkins Loans, and Direct Loans. Tuition, fees, on-campus room and board will be paid automatically by these proceeds, but *other charges* on your Student Account (such as mandatory health insurance, graduation fees, library replacement charges, residence hall charges, etc.) cannot be deducted without your authorization. Note: Parking fines and Health Services charges cannot be deducted from your financial aid and must be paid directly to the appropriate offices.

In order for the Student Accounts Office to pay *other charges* with your Federal financial aid, you must provide permission.

Therefore, please check one of the statements below.

_____ **I authorize** the Student Accounts Office at UNCSA to deduct *other charges* on my Student Account (such as mandatory health insurance, graduation fees, library replacement charges, residence hall charges, etc.) in addition to tuition and fees, on-campus room and board, if applicable, from my Federal financial aid funds. *I understand that this authorization must be completed before the end of the semester to take effect for the current semester.*

_____ **I do not authorize** the Student Accounts Office at UNCSA to deduct *other charges* on my Student Account (such as mandatory health insurance, graduation fees, library replacement charges, residence hall charges, etc.) in addition to tuition and fees, room and board, if applicable, from my Federal financial aid funds. **I will be responsible for and prepared to pay these charges separately before each term begins.**

Student signature

Date