



Office of Financial Aid Title IV Authorization Form

Monroe Campus Phone 318-345-9005 Fax 318-345-9087

STUDENT INFORMATION

Name _____ Student ID # _____

Best Contact Phone # _____ Date of Birth _____

IMPORTANT FINANCIAL AID INFORMATION

Federal regulations state that Louisiana Delta Community College (LDCC) is authorized to use the financial aid funds for which you are eligible to pay towards your direct institutional charges, such as tuition and fees. Additionally, the law allows you to authorize LDCC to use your financial aid funds to cover other allowable charges, which include, but are not limited to, bookstore charges, parking decals, etc. In order for LDCC to apply your financial aid funds to pay for other allowable charges, you must authorize LDCC to do so by completing this form and returning it to the Office of Financial Aid.

AUTHORIZATIONS

Yes, I authorize LDCC to apply Title IV funds to non-institutional charges such as, bookstore charges, return of Title IV funds, parking decals, etc. and/or other educational charges.

Yes, I authorize LDCC to apply Title IV funds to other educational charges such as: prior-year balances, miscellaneous fees, and/or minor prior-year charges (less than \$200.00.)

Your signature on this form also indicates that you understand the following:

1. If I receive federal financial aid funds, I must attend all classes for which I have enrolled. If attendance cannot be verified, I understand that I may receive a notification of changes for all federal funds disbursed.
2. As a financial aid recipient, I should check with the Office of Financial Aid before dropping/withdrawing from any classes or changing my schedule in order to determine how those changes may affect my financial aid. I also understand that if I withdraw from all of my classes before the completion of 60% of the semester (official or unofficial), I may receive a bill based on the Return of Title IV Funds Policy. A copy of the Return of Title IV Funds Policy is available at the Office of Financial Aid and on the LDCC website at www.ladelta.edu.
3. I must comply with the Federal Financial Aid Satisfactory Academic Progress Policy (SAP). A copy of the SAP policy is available at the Office of Financial Aid and on the LDCC website at www.ladelta.edu.
4. I understand that the Office of Financial Aid communicates with me via email and through my LOLA account and it is my responsibility to regularly check my LOLA account, read my LDCC student email, as well as, the email entered on the Free Application for Federal Student Aid (FAFSA).

My signature on this form certifies that I acknowledge the information provided above allowing LDCC to use my financial aid to pay for expenses (beyond tuition and fees). I have read and understand this information. I must notify the Office of Financial Aid in writing should I decide to rescind the authorization.

Student Signature _____ Date _____