Title IV Authorization Form

Student Name:		
University ID Number:		
Address:		
City/St/ZIP:		
The United States Department obtain an author	partment of Education regulations require that an e rization to:	ducational institution
	nds to pay for educational costs incurred by the stu ampus room and board, (such as parking decal, rec	
	nis form is not signed, parking would NOT be paid b to be paid directly by the student.	y your Title IV funds.
5 1 5	charges limited to \$200. business days (instead of returning funds to the leadirements.	nder), while resolving
TITLE IV FUNDS INCL GRANT, STAFFORD LO	LUDE: SEOG FEDERAL GRANT, PERKINS LOAN, WO OAN and PLUS LOAN.	RK STUDY, PELL
campus housing and a authorize Indiana Univ eligibility. I understan	niversity to apply any funds I receive toward paymon any other charges billed through my Indiana University to pay prior year charges and release funds and that I can rescind any portion of this authorization at this authorization is valid for my entire academic	rsity student account. I to me after resolving on in writing at any
Signature	Date	_
** RETURN THIS SIGN FINANCIAL AID TITLE	NED FORM TODAY TO THE ADDRESS BELOW TO EXE IV CREDIT. **	KPEDITE YOUR
	your refund checkssign up for Direct Deposit: upui.edu/directdepositinfo.asp	

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