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| Student ID # | | | | | | | | | | | Last Name | | | | | | | | | | | First Name | | | | | | | | | | | | | | | | |

Your response to the following statement is required for federal student aid. Your circled response is either giving or not giving permission to have all charges on your student bill deducted from your financial aid. Tuition/fees and housing are automatically deducted but other charges such as lab fees or fines are not automatically deducted without your consent.

STUDENT DISBURSEMENT AUTHORIZATION FOR FINANCIAL AID

COMPLETION OF THIS FORM IS REQUIRED BY EIU FOR
DISBURSEMENT OF ALL TITLE IV FINANCIAL AID

I give or I do NOT give

(You must circle your choice above)

Eastern Illinois University has permission to use my Title IV Financial Aid to pay for all charges incurred at Eastern Illinois University, including pharmacy fees, parking permit, and parking tickets, etc. I give my permission; I understand that all charges I incur will be deducted by the Student Accounts Office from my Title IV Financial Aid before they will issue a refund to me.

If I do not give my permission to deduct all charges incurred, I understand that the Student Accounts Office will deduct only my tuition, fees and university housing from my Title IV Financial Aid before I receive a refund.

Student Signature

PLEASE NOTE: You may reverse your choice at any time by contacting the Office of Financial Aid.

YOUR TITLE IV (FEDERAL) FINANCIAL AID WILL NOT DISBURSE UNTIL THIS IS COMPLETED AND THE SIGNED FORM IS RECEIVED BY THE OFFICE OF FINANCIAL AID.