

# BPCC FINANCIAL AID OFFICE

6220 EAST TEXAS BOSSIER CITY, LA 71111 318.678-6026

## AUTHORIZATION FORM 2009-2010

Name \_\_\_\_\_ Campus ID(or SSN) \_\_\_\_\_  
Please Print Last Name First Name  
Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_

### Section A. Financial Aid Authorizations

The BPCC Financial Aid Office reserves the right to review your award package at any time. Awards are made based upon the anticipated enrollment as stated on your Free Application for Federal Student Aid (FAFSA). All awards are subject to modification should your financial aid status or your enrollment status change. If at any time you become ineligible for all or a portion of your financial aid award, BPCC reserves the right to charge your student account as necessary.

#### By my signature below:

- I acknowledge and understand that if I resign from BPCC (officially or unofficially) before completing more than 60% of the semester, I will owe money to the federal aid program(s) and/or BPCC.
- I understand the BPCC Policy for Financial Aid Satisfactory Academic Progress (mailed to me and also available at [www.bpcc.edu/financialaid](http://www.bpcc.edu/financialaid)). I understand that I must comply with this policy in order to be eligible and maintain eligibility for federal financial aid at BPCC.
- I understand that dropping courses or resigning from the College may affect my financial aid eligibility. It is my responsibility to check with the Financial Aid Office prior to dropping courses or resigning from the College.
- I understand that the BPCC Financial Aid Office may, at any time, verify the information I submit on my federal financial aid application and that any errors and/or conflicting information discovered during the process of verification must be corrected. I certify that I will allow the BPCC Financial Aid Office to make the necessary corrections to my financial aid application.
- I understand that I may **NOT** receive Title IV aid (Pell Grant, SEOG, ACG, Stafford Loans, Federal Work-Study) at two schools **at the same time**. I certify that I am not receiving federal aid at another school for this academic year.
- I certify that I have accessed the Award Information Form (available at [www.bpcc.edu/financialaid](http://www.bpcc.edu/financialaid) or you may request a copy from the Financial Aid office) and understand the information contained therein, pertaining to Cost of Attendance and Satisfactory Academic Progress and have asked for help on topics that I did not understand.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

BPCC uses a system of applying awards to the charges of eligible students. BPCC **automatically** applies Title IV awards to tuition and fees. The student may authorize BPCC to apply Title IV awards to other educational charges incurred, such as books, parking tickets, library fines, community education charges, prior-semester balances, prior-year balances, etc. Also, if the student account has a credit balance, the student may authorize BPCC to apply the balance to any outstanding charges such as return of Title IV funds, library fines, parking tickets, etc.

\_\_\_\_\_ I understand that I may revoke any individual item or all of these authorizations at any time by submitting to the (initial) Financial Aid office, in writing, my request to revoke these authorizations.

### ALLOW Authorization

I AUTHORIZE BPCC to apply Title IV awards to:

- other educational charges such as books, Return of Title IV funds, library fines, parking tickets, community education charges, placement tests, parking permit, prior semester balances from same award year, miscellaneous fees, etc...
- minor prior-year charges, (less than \$200)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### DENY Authorization

I **DO NOT** authorize BPCC to apply Title IV awards to other educational charges.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## Section B. Satisfactory Academic Progress Policy (SAP)

I certify that I have received a copy of the BPCC SAP policy and have read and understand the SAP requirements. I realize that I must comply with this policy in order to be eligible and maintain eligibility for federal financial aid at BPCC. I understand that I may access the SAP policy online at [www.bpcc.edu/financialaid](http://www.bpcc.edu/financialaid) or I may request additional copies from the Financial Aid office.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

## Section C. Report Other Aid You Expect to Receive

Are you expecting to receive or have you applied for other aid (tuition exemptions, scholarships, waivers, etc...) for the 2009-2010 academic year?

\_\_\_\_\_ *No, I do not expect to receive other aid, nor have I applied for other aid. I understand if I am awarded other aid during the 2009-2010 academic year, I must notify the Financial Aid office immediately.*

\_\_\_\_\_ *Yes, I anticipate receiving the following aid (do not include Pell Grant, SEOG, Stafford Loans, FWS, ACG))*

<u>Type of Aid Expected</u>	<u>Estimated Amount for 2009-2010</u>

## Section D. Report All Schools You Have Attended

Have you **EVER** attended and/or enrolled at any colleges/universities since high school? \_\_\_ Yes \_\_\_ No

If yes, list all educational institutions below (Include BPCC):

School: \_\_\_\_\_ Dates attended: \_\_\_\_\_

School: \_\_\_\_\_ Dates attended: \_\_\_\_\_

School: \_\_\_\_\_ Dates attended: \_\_\_\_\_

School: \_\_\_\_\_ Dates attended: \_\_\_\_\_

I certify that the above information is true and correct. I have read, completed, and understand all sections of this form.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*