

Barry University

Cashier/Business Office

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Accounts & Billing

P: 305.899.3585 | F: 305.899.3375

cbo@barry.edu

Professional And Career Education

P: 305.899.3322 | F: 305.899.4790

acecbo@barry.edu

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Federal Student Aid Authorization Form

The United States Department of Education regulations allow Barry University to credit your Federal Student Aid to your student account for payment of tuition, required fees, room, and board. Federal Student Aid funds include Direct Stafford Loans, PLUS Loans, Perkins Loans, Pell Grants, Supplemental Education Opportunity Grants (SEOG) and TEACH Grants or any other federal financial aid awards.

The University may also apply Federal Student Aid to other charges on your student account only if you grant permission for the University to do so. Other charges include, but are not limited to Health Insurance, meal plans, ID charges, parking fees, and graduation fees.

The University must also obtain authorization from you to apply excess current year Federal Student Aid to prior year charges not to exceed \$200.00

_____ I authorize Barry University to apply my Federal Student Aid toward payment of all charges on my student account, including prior year charges not to exceed \$200.00.

_____ I do not authorize Barry University to use my Federal Student Aid for charges other than tuition, required fees and room and board. I do not want to use any excess current Federal Student Aid for prior year outstanding charges. I understand I will be responsible for any outstanding balance remaining on my account. I further understand that an outstanding balance could prevent registration for a subsequent term and will prevent the release of official documents such as transcripts and diplomas.

I understand this a voluntary authorization and is valid throughout my academic career at Barry University, I can rescind this authorization at any time either in writing or on Web Advisor. Any changes to this authorization are not retroactive and take effect the day of the University receives the change.

Your authorization will not prevent you from receiving a refund of your excess Federal Student Aid or any other eligible credit balance after all charges are covered.

By signing this form, I indicate I have read and understand the information.

Student Signature _____ Student ID# _____

Print Name _____ Date _____

