

## **University Billing Office**

## AUTHORIZATION TO PAY MISCELLANEOUS CHARGES WITH EXCESS FINANCIAL AID FUNDS

## Use of excess aid to pay miscellaneous charges:

I HEREBY AUTHORIZE The University of Iowa to apply any excess funds from my financial aid directly to my University Bill (U-Bill) to cover miscellaneous charges currently owed. I understand that normally all excess monies would be refunded directly to me and it is my choice to waive the refund process.

This authority will remain in full force and effect until The University of Iowa has received written notification from me of its termination in such time to allow the University a reasonable opportunity to act on it.

## Use of excess aid to pay prior session charge(s):

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I HEREBY AUTHORIZE The University of Iowa to apply any excess funds from my current session financial aid directly to my U-Bill to cover any prior session charge **not to exceed Two Hundred (\$200.00) dollars**. Financial aid will not be applied to the U-Bill until the start of the session.

|  |                 | This is a one-time s  | single session authorization.                     |
|--|-----------------|---|---|
| Session<br>Authorized:   | Spring<br>Fall  | Summer<br>Winter  | Year:   |
| If there is money re   | maining after p | aying these charges, I understa   | and that the excess funds will be refunded to me. |
| Printed Name:  |                 |   | Date:   |
| UnivID #:  |                 |   |   |
| Signature:   |                 |   |   |
| IF your PARENT or BORROWER has received a Parent PLUS loan, their signature is REQUIRED below: |                 |   |   |
| Parent/Borrower  | Signature (PLUS | 5 loan only):   |   |
| Print this form, sig   | gn and mail to: | UI Service Center<br>University Billing<br>2700 University Cap<br>Iowa City, IA 52242 |   |