



Cancellation of Financial Aid Disbursement Authorization 2009/10

Contact: Alexis Levenson, Cashier's Office
(828) 251-6609 or alevenso@unca.edu

Student Name: _____ Student ID: _____
Last First

Telephone: _____ Email: _____

This form must be completed in order to rescind authorization to directly apply financial aid proceeds to all of my student account charges. This form is not applicable to Federal Student Aid (FSA) Loan Program funds. Types of FSA funds are Subsidized, Unsubsidized Loans, and Federal PLUS Loans.

I understand that the decision to rescind authorization to directly apply financial aid proceeds to all of my student account charges:

- Will delay delivery of proceeds to me.
- Will prohibit use of federal funds to defer payment of charges beyond tuition, fees, and contracted room and board.
- Will prohibit use of federal funds to pay a prior year balance less than \$200.
- May result in the cancellation of classes if UNCA charges are not paid by the fee payment deadline established by the Cashier's Office.

I understand that this notification must be provided to the Cashier's Office. The authorization is not retroactive and will become effective no less than 20 working days from the receipt date of this for the next semester. This authorization will remain in place as long as I remain enrolled at UNCA, unless I submit a new "Student Refund Authorization" form.

My signature confirms that I have read and understood all instructions and that I have provided accurate, complete, and current information.

Signature: _____ Date: _____

If not completed in the presence of a Cashier's Office, Financial Aid Office, or OneStop Office representative, then a notary is required:

On this, the _____ day of _____, 20____, before me, a notary public and the undersigned officer, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledge that he executed the same for the purposes therein contained. In witness hereof, I hereunto set my hand and official seal.

Notary Public

Commission expires

For Office Use Only:

Complete below if the student signed this form and provided valid picture identification to UNCA representative.

UNCA Representative Initials _____ Date: _____