



Harvard Division of Continuing Education

Student Financial Services
51 Brattle Street
Cambridge, Massachusetts 02138-3722
(617) 495-4293 phone
(617) 410-4072 fax
studentfinance@extension.harvard.edu

Federal Financial Aid Payment Authorization

Federal regulations require that schools obtain authorization from a student (or parent borrower) to pay for allowable charges other than tuition with any federal financial aid the student is receiving such as the Federal Direct Loan, Graduate PLUS Loan, or Federal Pell Grant. If you wish to use your federal financial aid to pay your health insurance charge(s) and/or any other current-term charges beyond your tuition, you must submit this form to Student Financial Services (SFS) before registration.

If you are a dependent student whose parent has borrowed a Federal PLUS Loan and your parent wishes to authorize payment from the PLUS loan to pay your health insurance charge(s) and/or any other current-term charges beyond your tuition your parent must also complete the parent authorization section and return it to SFS.

If SFS does not receive this authorization from you before registration then your aid for the current term will be applied *only* to your tuition. Your authorization will take effect beginning with the next term registration cycle. Any remaining financial aid will be refunded to you. You will be responsible for paying the balance owed on your account.

Student Authorization

I authorize Harvard Extension School to use my Title IV federal financial aid to pay my health insurance charge(s) and/or any other current-term charges beyond my tuition.

I understand that this/these charge(s) will be deducted along with my tuition from my financial aid before any remaining amount is refunded to me each term. If my financial aid does not cover my tuition and fees I understand that I will be billed for any balance remaining on my account. My authorization remains in effect indefinitely unless I request otherwise.

I may cancel or modify this authorization at any time by submitting a written request to Student Financial Services. The cancellation or modification will be effective as of the date SFS receives the notification.

Please type or print clearly.

Student's name _____
Last First Middle initial

DCE ID number @

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(see www.extension.harvard.edu/login if unsure)

Student's signature _____ Date _____

Parent Authorization (for the parent of a dependent student borrowing a PLUS Loan)

I authorize Harvard Extension School to use my Federal PLUS loan to pay my child's health insurance charge(s) and/or any other current-term charges beyond his/her tuition fee.

I understand that this/these charge(s) will be deducted along with my child's tuition from my Federal PLUS Loan before any remaining amount is refunded to me each term. My authorization remains in effect indefinitely unless I request otherwise.

I may cancel or modify this authorization at any time by submitting a written request to Student Financial Services. The cancellation or modification will be effective as of the date SFS receives the notification.

Please type or print clearly.

Parent's name _____
Last First Middle initial

Parent's signature _____ Date _____