



Accounts Receivable

RELEASE OF TITLE IV FUNDS

TO: Accounts Receivable

FROM: STUDENT NAME, STUDENT ID #, ADDRESS, PHONE, CITY, STATE, ZIP

DATE:

I authorize Tulane to apply my excess federal financial aid proceeds to any institutional charges beyond tuition and fees (and room and board, if applicable) that are charged to my account. Those charges may include, but are not limited to bookstore purchases, parking permits, parking fines, library fines, student health center charges, health insurance and prior semester balances posted to my account. I understand that this authorization will remain through subsequent years.

Signature: Date:

For Account Receivable Use Only

Code: 41915 Screen 404
CID (Initials): Selection Flag 3: T
Term:
Memo: M
Date Entered: