

Student Name: _____ Parent PLUS Borrower Name _____

International University of Nursing Parent PLUS Borrower Authorization Form

*34 CFR 668 Support K of the Code of Federal Regulations was established to ensure that federal financial aid is used for its intended purpose and delivered to students in an efficient manner. Signing the following statement and authorization (s) give the Bursar of International University of Nursing the written authorization that is needed in handling the student's account with Title IV funds *that are related to account charges, and past balances. The following authorization(s) signed by the student is (are) valid for the loan period in which it was obtained and for as long as the student is enrolled at the school. The university must notify the student once a loan period of the provisions contained in the authorization(s). The student has the right to rescind any previously granted authorization(s) by written request, with the rescission being applicable toward funds not yet credited toward account charges. To rescind authorization, please complete a new Authorization Statement, available by request.*

**Title IV Aid includes: Direct Stafford Loans and PLUS loans.*

Please read each definition carefully and provide your signature below each item you wish to authorize.

AUTHORIZATION TO PAY OTHER CHARGES

Definition: 34 CFR 668.164 specifically states that Title IV program funds (the majority of federal aid sources) may only be credited to a student's account for allowable charges which include current tuition, fees, room and board (if contracted and billed by the school). Before crediting Title IV funds to pay for other charges, including books, student and dependent insurance, and penalties/fines, the university must have the following written authorization from the student.

I (Parent of IUON Student) hereby authorize International University of Nursing to use my Title IV financial aid funds to pay for other educational related expenses that may be charged to the student's account including books, student and dependent insurance, and penalties/fines and other incidental educationally related charges.

Parent PLUS Borrower Signature _____ Date _____

AUTHORIZATION TO PAY PAST BALANCES

Definition: 34 CFR 668.165 specifically states that before the university credits Title IV program funds to pay for past account balances, the University must have written authorization from the student.

I (Parent of IUON Student) hereby authorize International University of Nursing, upon crediting student's account for current allowable charges which include tuition, fees, room and board, to apply any remaining Title IV funds to past charges that remain on the student's school account up to the maximum allowed by Federal Regulation (\$200.00) per loan period.

Parent PLUS Borrower Signature _____ Date _____

COMPLETE THE SECTION BELOW ONLY IF YOU WANT TO CANCEL YOUR PRIOR AUTHORIZATION

RESCIND AUTHORIZATION REQUEST

I (Parent of IUON Student) hereby rescind all prior authorizations for processing of Title IV Funds. I understand that by rescinding this, I am solely responsible for paying all non-institutional charges (anything above and beyond the required Tuition and Fees within the allotted time period.

Parent PLUS Borrower Signature _____ Date _____