



AUTHORIZATION FORM

(Complete and return to the Financial Aid Office)

DATE: _____

STUDENT: _____

ACADEMIC/AWARD YEAR: 2008-2009

I. CIRCLE ONE (*Pennsylvania residents only*)

COMMUTER: Living at home with parents or supporting
relative other than a spouse.

OFF CAMPUS: Living away from parents' home.

II. USE OF FUNDS

I authorize the school to use my financial aid to pay for books, kits, supplies and equipment as charged to my account. I understand my authorization will remain in effect until I request a change. Further, I understand that I may cancel this authorization at any time.

Comments:

STUDENT'S SIGNATURE
