Parent PLUS Fee Authorization

Student's Name ___________________________ or ___________________________

USC ID My VIP ID

Parent Borrower's Name ___________________________

We have certified a Parent PLUS Loan on your behalf to benefit the dependent student named above. The U.S. Department of Education requires that Federal Title IV financial aid funds, which include Federal Parent PLUS Loan funds, only be applied towards allowable institutional charges such as tuition and fees and university housing and meal plans, when applicable. However, by completing this authorization, you agree to allow the University to satisfy all outstanding charges appearing on your dependent student's account with PLUS loan funds.

You are not required to sign this authorization form; and if you do, you may cancel it in writing at any time. However, if this authorization is not provided, charges such as a parking permit or health center charge would NOT be paid by your Parent PLUS loan funds. Cancellation of this authorization may result in unpaid charges on your dependent student's account for which s/he will be solely responsible.

TITLE IV FEE AUTHORIZATION STATEMENT

I authorize the University of South Carolina Aiken to apply any excess Parent PLUS Loan funds to non-institutional charges appearing on my dependent student's account for the academic year. I understand that this authorization is valid from the date of completion throughout my student's academic career at USC Aiken. I may rescind this authorization at any time by notifying the Business Services Office in writing at University of South Carolina Aiken, Business Services Office, 471 University Parkway, Aiken, SC 29801.

Parent Borrower's Signature ___________________________________________ Date __________

Return this completed form by mail, fax, or in person to:
University of South Carolina Aiken, Business Services Office, 471 University Parkway, Aiken, SC 29801
Phone: 803-641-3543 Fax: 803-641-3693 Email: stubill@usca.edu