

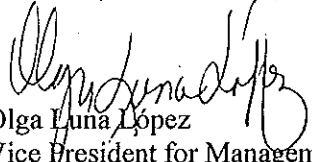
INTER AMERICAN UNIVERSITY OF PUERTO RICO

Federal Regulations under Title IV provide that the University may only deduct specific costs, including credits and certain fees, from your financial aid. You must authorize the University to use the remaining balance of financial aid for other fees and charges. Otherwise, you must complete the payment procedures, before receiving your reimbursement, which would require the use of your personal funds.

The authorization form included below would allow the University to make these deductions, thus, facilitating the process.

Please turn this form in to your Campus Bursar's Office.

We wish you success in your studies.

  
Olga Luna López  
Vice President for Management, Finance and Systemic Services

\*\*\*\*\*

**AUTHORIZATION FORM TO USE REMAINING BALANCE OF FINANCIAL AID**

I, \_\_\_\_\_ student identification number \_\_\_\_\_, hereby authorize the Inter American University of Puerto Rico to charge from the remaining funds of my financial aid for any costs related to my education, in addition to enrollment fees, room and board. Currently, these charges include the following: cafeteria, late enrollment fees, traffic or library fees, parking, books, graduation fees, fees for additions or changes to my course load, arrangements for deferred payments, late fees for deferred payments, late final exam, transcripts, fees for returned checks, credit validation tests, comprehensive examinations, change of majors, active status maintenance, identification cards, fees to evaluate minors, certification of studies, fees for goods and services, technological educational equipment, baggage of materials charge, materials kit, professional development services fees and payment of debts from previous semesters no more than \$200.00.

This authorization applies to my entire period of enrollment at the Inter American University of Puerto Rico. I understand that I may modify or rescind this authorization at any time by submitting the corresponding document for this purpose at the Campus Bursar's Office.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature