



CLARENDON COLLEGE FINANCIAL AID OFFICE

Student Data & Fee Authorization Form (Multi-Year Form)

GENERAL INFORMATION

Student Name: _____ Social Security #: _____ - _____ - _____
Last First MI

Address: _____
Street City ST Zip Code

Home Phone Number: (____) _____ - _____ Cell Phone Number: (____) _____ - _____

Email Address: _____ Major: _____

Please indicate how you prefer to be notified by the Financial Aid Office: Email _____, Home Phone _____, **Text _____

****If you prefer to receive notifications via text message...Standard Data and Text charges may apply****

Which campus will you attend/register? Please circle your choice. Clarendon Pampa Childress Amarillo

Are you a high school graduate? [] Yes [] No If no, do you have a GED? [] Yes [] No

Have you attended Clarendon College previously? [] Yes [] No If yes, please list year(s) _____

Have you attended other colleges or universities? [] Yes [] No [] Dual Credit

*** All College and High School Official Transcripts must be received before Financial Aid Packages can be awarded. ***

AUTHORIZATION OF CHARGES AND FINANCIAL AID *(this is a Multi-Year Form unless rescinded by student in writing to the financial aid office)*

Federal Student Aid regulations require that Clarendon College obtain permission from students before Title IV funds are credited to any charge on their account. Please sign the following authorization statement and return it to the Financial Aid Office. A student does have the right to rescind his/her permission at a later date for aid not yet awarded and received.

I agree that Clarendon College may deduct from the financial aid award any or all of the following charges for the current academic year. A maximum of \$200.00 can be applied to prior year charges.

- | | | |
|----------------------------|-----------------------------|--------------------------|
| Book Purchases | Library Fines | Fees other than required |
| Returned Checks | Returned Check Fees | Student Fines |
| Certification Testing Fees | Housing Damages | Parking Fines |
| Lost Key Charges | Repayment of FA Over-Awards | |

Other charges which may be assessed not specifically listed above may be deducted from my financial aid award unless revoked in writing.

CERTIFICATION

By signing below, I certify to the best of my knowledge that the information contained in this document is correct and complete. By signing, I understand this is a multi-year form and to rescind the authorization I must contact the financial aid office in writing. By signing, I understand if I chose to be notified by text message that standard data and text charges may apply.

Signature: _____ Printed Name: _____

Date: _____

Clarendon College does not discriminate on the basis of age, sex, color, national or ethnic origin, race, religion, creed, and/or disability in the administration of its educations policies, admission policies, scholarship and loan programs, employment practices, and al institutional programs.