



South Central Louisiana Technical College  
Office of Financial Aid  
Lafourche-Reserve-Young Memorial  
Campuses  
[finidscl@scl.edu](mailto:finidscl@scl.edu)

## Authorization Form

Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### Section A. Important Financial Aid Information

\_\_\_\_\_ I understand that the Financial Aid office communicates with me via LOLA and I understand it is my  
(Initial) responsibility to read my SCLTC student email regularly as well as the email address I entered on my  
FAFSA. I also understand if I do NOT wish to receive my Financial Aid communications and award  
notifications via email, I may submit a request in writing to the Financial Aid Office (address below).

#### By my signature below:

- I acknowledge and understand that if I resign or stop attending classes (Officially or Unofficially) before completing more than 60% of the semester, I may owe money to the federal aid program(s) and/or SCLTC.
- I have read and understand SCLTC Policy for Financial Aid **Satisfactory Academic Progress (SAP)** (available online at [www.scl.edu](http://www.scl.edu) under Financial Aid, you may request a copy from the Financial Aid Office). I understand that I must comply with this policy in order to be eligible and maintain eligibility for federal financial aid at SCLTC.
- I understand that dropping courses or resigning from the College may affect my financial aid eligibility. It is my responsibility to check with the Financial Aid Office **prior** to dropping courses or resigning from the College.
- I understand that the SCLTC Financial Aid Office may, at any time, verify the information I submit on my federal financial aid application and that any errors and/or conflicting information discovered during the process of verification must be corrected. I certify that I will allow the SCLTC Financial Aid Office to make the necessary corrections to my financial aid application.
- I understand that I may **NOT** receive Title IV aid (Pell Grant, SEOG, Federal Work-Study) at two schools **at the same time**. I certify that I am not receiving federal aid at another school while receiving aid at SCLTC.
- I understand that should it be determined for any reason that I am not eligible to receive aid, **I will personally be responsible for the full balance owed to South Central Louisiana Technical College (tuition, books, fees, etc.)**.
- I certify that I have read the information provided on LOLA and have been notified of the requirements to keep my financial aid eligibility (also available at [www.scl.edu](http://www.scl.edu) you may request a copy from the Financial Aid Office) and understand the information contained therein, pertaining to Cost of Attendance and Satisfactory Academic Progress and have asked for help on topics that I did not understand.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student ID # \_\_\_\_\_

**Section B. Authorizations**

SCLTC uses a system of applying awards to the charges of eligible students. SCLTC **automatically** applies Title IV awards to tuition and fees. The student may authorize SCLTC to apply Title IV awards to other educational charges incurred, such as books, library fines, prior-semester balances, prior-year balances, etc.

If the student account has a credit balance, SCLTC will pay the credit balance to the student in accordance with the SCLTC refund policy unless the student authorizes **(in writing)** SCLTC to **hold** the credit balance for future charges.

**By my signature below, I AUTHORIZE SCLTC to apply Title IV awards to *non-institutional charges* such as:**

- Books, Return of Title IV funds, library fines, placement tests, parking tags, etc.

**By my signature below, I AUTHORIZE SCLTC to apply Title IV awards to *other educational charges* such as:**

- Prior semester balances from same award year, miscellaneous fees, etc...
- Minor prior-year charges, (less than \$200)

**Furthermore, by my signature below, I understand that I may *revoke* any individual item or all of these authorizations at any time by submitting to the Financial Aid office, in writing, my request to revoke these authorizations.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

South Central Louisiana Technicial College does not discriminate on the basis of race, color, national origin, gender, age, religion, qualified disability, marital status, veteran's status, or sexual orientation in its hiring or employment practices or in admission to its programs, services, or activities, in access to them, in treatment of individuals, or in any aspect of its operations.