



## TITLE IV FSA PROGRAM FUNDS AUTHORIZATION FOR EXCESS FUNDS/CREDIT BALANCES

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

Student Name: \_\_\_\_\_

FSC ID Number: \_\_\_\_\_

I hereby authorize Florida Southern College to retain any excess funds/credit balances created by FSA Program Funds which remain in my student account after allowable institutional charges for tuition, fees, and room and board have been paid. These funds may be used to pay other institutional fees such as parking permits and fines, lab fees, equipment rental, other fines and penalties, and student Moc Buck purchases on campus.

Any interest which is earned on these funds will be kept by the college and will not be paid to the student or parent.

Plus Loan funds require the parent to sign this agreement.

This authorization may be cancelled or modified at any time by writing a letter to the Business Office/Student Accounts:

Florida Southern College  
111 Lake Hollingsworth Drive  
Lakeland, FL 33801

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

Parent Signature: \_\_\_\_\_  
(For Plus Loans)

Print name of  
Person signing: \_\_\_\_\_