

🕻 503.517.1207 🖶 503.517.1352 🗥 warnerpacific.edu

2024-2025 Academic Year

Student Cash Management Authorization

OFFICE OF STUDENT ACCOUNTS

PERC

--Office Use Only-- ARAC

Title 34 part 5 of the code of Federal Regulations was established to ensure that Federal Financial Aid (Title IV Funds) is used for its intended purpose and delivered to students in an efficient manner. Signing the following statement and authorization(s) gives the Office of Student Accounts of Warner Pacific University the written authorization that is needed in handling the student's account with Title IV Funds that are related to account charges and credits.

The following authorization(s) signed by the student is (are) valid for the award year in which it was obtained and for as long as the student is enrolled at the university. The student has the right to rescind any previously granted authorization(s) by written request, with the rescindment being applicable toward funds not yet credited toward account charges. Students must complete a new authorization form and return it to the Office of Student Accounts to rescind previous authorization.

I have read, understand, and have received the following explanations concerning the crediting of Title IV Financial Aid Funds to my student account. I understand that my written authorization is needed to credit my account with Title IV Funds for any charges other than those allowable by law which include tuition, fees, room and board. I understand that any authorization given is valid for the current 2024-2025 award year and thereafter until I rescind that authorization in writing using the form available in the Office of Student Accounts.

STEP 1 - STUDENT INFORMATION					PLEASE PRINT LEGIBLY
					TELASET KINT LEGIDET
Last Name	First Name	M.I.	WPU ID Number		
Instructions: Please re (Two signatures may	-	orization carefull	y and provide your	signature belov	w each authorization as appropriate.
STEP 2 - AUTHOR	R CHARGES		A hand writte	en signature, not typed, is required.	
for allowable charges,		es, room and boa	rd. Before crediting	Title IV Funds t	only be credited to a student's account to pay for other charges, including dent.
·	rner Pacific University to use my t account, including books.	Title IV Financial	Aid Funds to pay fo	r other educatio	onal related expenses that may be
Student Signature:					Date:
STEP 3 - CREDIT I	BALANCE AUTHORIZATION	<u>NC</u>			CHOOSE ONE OPTION BELOW
Definition: 34 CFR spe	RETAIN CREDIT ON ACCOUNT cifically states that if the studen estudent specifically requests the				ne University must disburse the credit to
that I may request a p students. My intent in understand that the U	ortion or all of the credit at any and the credit at any and the credit on account is	time through the s to apply it towar efund to me at the	normal University p d future charges, or	rocess establish for the conven	e IV Funds disbursed to me. I realize ned for releasing credit balance funds to ience of managing my personal funds. I at I may re-deposit end of year refunds
AUTHORIZATION TO E I hereby authorize Wa					account resulting from Title IV Funds se one of these options on the reverse
☐ HOLD: Ret	ain the credit balance on my acc	ount in advance p	ayment of future ch	narges.	
	lease refund my credit balance t	o me using the m	ethod indicated on	the reverse side	of this form
REFUND: P	rease returns my credit balance t	o file using the fil	ctilod ilidicated oil		or this form.

2219 SE 68th Avenue · Portland, OR 97215

CRI/SAXXCASH

Student Refund Authorization



STEP 1 - STUDENT INFORMATION

PLEASE PRINT LEGIBLY

Last Name	First Name	M.I.	WPU ID Number			
OPTION 1 - DIREC	T DEPOSIT					
I hereby authorize WPU at the financial institution ed by WPU, either direct authorize WPU, either of	on (hereinafter "Bank") indicated tly or through its service provide directly or through its service pro	rvice provider, to I on this form. Fu r, to my account. vider, to debit my	deposit any amounts owed me by initiating credit entries to my account rther, I authorize Bank to accept and to credit any credit entries indicat- In the event that WPU deposits funds erroneously into my account, I account for an amount not to exceed the original amount of the erronemail advice detailing the amount(s) deposited.			
	remain in full force and effect un PU and Bank reasonable opportu		ved written notice from me of its termination in such time and in such			
Account Information The account number is	n not your debit card number.					
Bank Name/City/Stat	e:					
Routing/Transit #: Account Number: Checking Savings Other (not debit card)						
	MICR line, detailing where the intering system. For best results at		sary to complete this form can be found. Please note, however, that not eck.			
Memo 1: □1:234:567	8 1: 123456789 "	0101				
(A 9-digit n		ccount # (not ard number)	Check # (This number matches the number in the upper right corner of the check — not needed for direct deposit)			
OPTION 2 - PAPER CHECK By leaving the direct deposit account information above blank, you are requesting that all money due to you from Warner Pacific University be issued by paper check and mailed to your permanent mailing address filed with the Office of the Registrar unless indicated on the reverse side that you wish to have your credit balance held on your account for future charges. Held balances will be refunded at the end of each academic year either by direct deposit (if account information submitted above) or paper check mailed to the permanent mailing address.						
STEP 2 - REQUIRED SIGNATURE ON THIS FORM I hereby authorize Warner Pacific University to use the method indicated			A hand written signature, not typed, is required. above to refund any student account credit balances and/or expense			
reimbursements or oth	er expense payments due me.					
Student Signature:			Date:			