

# East Tennessee State University

Office of Financial Aid  
PO Box 70580  
Johnson City, TN 37614

Phone: 423.439.2035  
Fax: 423.439.2070

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## FINANCIAL AID & PRIOR BALANCES AUTHORIZATION FORM

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By completing this form, you are designating which charges can be paid to ETSU with federal, state, institutional and private financial aid. Financial aid can automatically pay current tuition, fees, and housing charges. However, federal regulations require you to provide written authorization if you want financial aid to pay *prior* term balances or *non-educational* charges (e.g., parking tickets, etc.). Although you may never have these charges while enrolled at ETSU, ETSU must have your authorization on file. This form will remain valid for **ANY** financial aid (federal, state, institutional and private) to be applied to your student account until you notify the office of any changes or upon graduation.

Please mark **ONE** of the following options, sign, and return the form to the Office of Financial Aid.

- If you want ETSU to use your financial aid to pay all charges (i.e., current educational, non-educational, and prior year balances), mark the following box.

I voluntarily authorize ETSU to credit all financial aid to my student account to pay current educational and non-educational charges as well as prior term balances. I understand that selecting this option ensures all financial obligations to the university will be satisfied before any Balance of Aid will be issued to me. I understand this authorization will remain valid and I may cancel this authorization, in writing, at any time.

- If you do not want to use your financial aid funds and would rather pay out-of-pocket for non-educational charges and prior year balances, mark the following box.

I do not authorize ETSU to credit financial aid to pay non-educational charges as well as prior term balances. I understand that selecting this option DOES NOT ensure all financial obligations to the university are satisfied before any Balance of Aid will be issued to me and it is my responsibility to be aware of and pay for these charges myself or I WILL BE DENIED ACCESS to services at ETSU.

\_\_\_\_\_  
Student Name (please print)

\_\_\_\_\_  
ETSU ID

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

\_\_\_\_\_  
Date