

2022-2023 TIV Aid Authorization

All Helena College students who apply for federal financial aid (also known as “Title IV aid”) must completed two Title IV Authorizations in MyHC. These authorizations will information Helena College whether or not a student would like to apply any Title IV funds to non-institutional charges (such as student health insurance, library fines, etc.) as well as any prior term balance (under \$200) that may be on the semester bill at the time federal aid disburses.

Once these authorizations have been submitted in MyHC a student cannot update their answers in that portal, but instead must complete this form. Please complete the two sections below and provide your signature to update your authorization update(s) for the 2022-2023 academic year.

Name: _____ HC ID#: 770-_____

HC E-Mail: _____ Phone#: _____

Authorization # 1: I (the student listed above) authorize University of Montana to apply any federal (Title IV) funds I receive toward non-institutional charges including, but not limited to: the UM Student Health Insurance premium, library fees, parking permits/fines, program specific fees, fees for lost or damaged equipment/property, testing fees, course withdrawal fees, health center service charges, etc.). I understand that if I do not authorize University of Montana to pay these charges with my financial aid funds, I will be responsible for paying all non-institutional charges owed to the University.

- **Decision (circle one):** **Authorize** / **Decline**

Authorization # 2: I (the student listed above) authorize University of Montana to pay Prior-Year non-institutional charges (up to \$200) with Title IV financial aid funds (Direct Student Loans, PLUS Loans and Federal Grants). The authorization permits University of Montana to pay Prior-Year non-institutional charges with remaining Title IV funds after tuition and fees have been paid. Non-institutional charges include but are not limited to: bookstore vouchers, library fees, parking permits/fines, program specific fees, fees for lost or damaged equipment/property, testing fees, course withdrawal fees, health center service charges, etc.). I understand that if I do not authorize University of Montana to pay these charges with my financial aid funds, I will be responsible for paying all prior-year non-institutional charges owed to the University.

- **Decision (circle one):** **Authorize** / **Decline**

By signing below, I (the student listed above) certify that I fully understand the implications of this change in authorization, and that this decision will remain in effect for the all aid disbursed in the 2022-2023 year, including summer semester of 2022, unless I complete another form changing my authorization decision(s).

_____ Date: ____/____/____

Student Signature