

Authorization to Refund Excess Federal Financial Aid Differently Than Automatic Refunds

STUDENT NAME (print): _____ REED ID#: _____

Reed College is authorized to refund excess Title IV funds as stated below. This authorization is valid for the entire academic year in which it is signed. I understand that I may rescind, in writing, this authorization at any time.

Federal PLUS Loan excess refund to (parent signature required):

- Student-Fall Bookstore-Fall-Amount \$ _____ Other-Fall
 Student-Spring Bookstore-Spring-Amount \$ _____ Other-Spring

FALL: _____ SPRING: Same as Fall
Name: _____ Name: _____
Address: _____ Address: _____

Special Instructions: _____

Parent Signature: _____ Date: _____

All other Title IV excess refund to (student signature required):

- Parent-Fall Bookstore-Fall-Amount \$ _____ Other-Fall
 Parent-Spring Bookstore-Spring-Amount \$ _____ Other-Spring

FALL: _____ SPRING: Same as Fall
Name: _____ Name: _____
Address: _____ Address: _____

Special Instructions: _____

Student Signature: _____ Date: _____

Return completed form to:
Reed College Business Office
3203 SE Woodstock Blvd
Portland, OR 97202-8199
(503) 777-7505 phone (503) 788-6687 fax