



Coleman University
8888 Balboa Avenue
San Diego, CA 92123

OFFICE OF FINANCIAL AID

Authorization Statement – Student

Authorization Statement – Independent Student

Note to Dependent Students: Please also have your parent complete the Authorization Statement –Parent

***Indicated data is required**

Section I: Student Certifications and Authorizations

* Student Last Name: (Please Print) _____
 * Student First Name: _____
 * Student Social Security Number: _____
 * Student Date of Birth (mm/dd/yyyy): _____

By Checking each box below, I agree to these three statements:

Statement #1:

I am Responsible for applying for funding to pay my tuition. If I don't apply for funding I understand that I must pay cash for any balance on my school account, and all future tuition.

Statement #2:

If I apply for the Title IV funds (financial aid), I understand the it will be processed for an amount that may cover up to the cost of tuition unless I request otherwise.

Statement #3:

All financial aid funds will be applied toward current and future tuition for classes in which I have already registered, or will register, including payment of tuition cost, books, supplies and equipment fees. No interest is paid to the student on any funds held by the college. I also authorize the use of current year funds to be used to pay minor prior year outstanding balances. I understand that I can change or cancel this authorization at any time.

Section II: Student Signature

By signing this statement, I certify that I understand and agree with the statements above. I understand that it is our responsibility to complete all paperwork necessary for future financial aid and that, as needed; the Financial Aid personnel will assist us with the paperwork.

Sign this Statement

By signing this statement, I (we) certify that all the information reported on it is complete and correct. If married, spouse's signature is optional.

Student

Date

Spouse

Date