



# FINANCIAL AID RELEASES (FAR)

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## **BOOKSTORE RELEASE**

**Yes**       **No**

I hereby authorize \_\_\_\_\_ deduct any and all indebtedness that  
(PRINT OR TYPE YOUR COLLEGE NAME HERE)

I may have at the \_\_\_\_\_ from any type of financial assistance  
(PRINT OR TYPE YOUR BOOKSTORE NAME HERE)

I might receive. In order to process the deductions, I consent to the release to the Bookstore of necessary information from my student financial assistance records.

I understand that I am personally responsible for payment of all my bookstore charges in the event that my grant/scholarship/loan is revoked or does not cover the entire balance of my charges. I accept full responsibility for the repayment of my charges. I acknowledge that KCTCS will pursue collection of all outstanding accounts pursuant to its Business Procedures. Further, I acknowledge if my account becomes delinquent KCTCS may refer it to outside agencies for collection with the referral being subject to additional fees and costs.

I also understand that my purchases are subject to the established refund policies and guidelines of the bookstore.

Further, I acknowledge and hereby grant the college the right to apply any financial aid I may receive toward the payment of this note, including but not limited to PELL, SEOG, external or institutional scholarships, and/or student loans.

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## **TITLE IV RELEASE**

**Yes**       **No**

I hereby authorize all funds, including Title IV, to be used for the purposes of payment of any non-required institutional charges (if assessed); fees, library fines, parking fine, etc.

I hereby authorize all current year funds to apply to any minor prior year charges.

*This is a voluntary authorization and you may refuse to authorize use of funds or rescind any or all provisions of the authorization at any time by contacting the financial aid office.*

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## **FERPA RELEASE**

I hereby authorize the Financial Aid Office to provide requested information to:

**My Parents**       **Yes**       **No**

**My Spouse**       **Yes**       **No**

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*Print or type Student's full name*

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*EMPLID or SSN*

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*Student's Signature*

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*Date*