

## FINANCIAL AID RELEASES (FAR)

<b>BOOKSTORE</b> 1	RELEASE		
□ Yes □	No		
I hereby authorize			deduct any and all indebtedness that
I may have at the I might receive. In or Information from my	raer to process	the deduction	ns, I consent to the release to the Bookstore of necessary
grant/scholarship/loa for the repayment of pursuant to its Busin	in is revoked or my charges. I ess Procedures	does not covacknowledge  Further, I ac	payment of all my bookstore charges in the event that my ver the entire balance of my charges. I accept full responsibility that KCTCS will pursue collection of all outstanding accounts cknowledge if my account becomes delinquent KCTCS may be referral being subject to additional fees and costs.
I also understand tha	t my purchases	are subject to	o the established refund policies and guidelines of the bookstore.
			ege the right to apply any financial aid I may receive toward the PELL, SEOG, external or institutional scholarships, and/or
TITLE IV RELI	EASE		
$\Box$ Yes $\Box$	No		
I hereby authorize al	l funds, includi		o be used for the purposes of payment of any non-required nes, parking fine, etc.
I hereby authorize al	l current year f	unds to apply	to any minor prior year charges.
This is a voluntary a authorization at any			refuse to authorize use of funds or rescind any or all provisions of the ncial aid office.
FERPA RELEA			tification will be required before any personal student information is released. dent information cannot be divulged via phone or other electronic means.
My Parents	□ Yes	□ No	Parent's Name:/
My Spouse	□ Yes	□ No	Spouse's Name:
Other	□ Yes	□ No	Specify Relation: Name:
I hereby authorize th	e Financial Aid	d Office to pro	ovide requested information to the above indicated individuals:
Print or type Student	's full name		EMPLID or SSN
Student's Signature			Date