

Old Dominion University
Financial Aid and Title IV
Rescind/Change Authorization Form

Student Name (please print clearly): _____

Student UIN: _____

Telephone Number: _____

Student E-mail Address: _____

I request to rescind/change the following financial aid/Title IV use authorization selections:

I wish to rescind my previous authorization concerning my student account refund in excess of institutional charges such as (tuition, required fees, room and board). Examples of non-institutional charges include late fees, collection fees, health fees and housing damage charges.

Yes No

and/or

I wish to rescind my previous selection concerning my student authorization to Old Dominion University to apply my financial aid, to include Federal Title IV funds, to pay for prior year balances up to \$200.

Yes No

Student Signature: _____

Date: _____

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- Once completed, the Rescind Financial Aid Authorization Form should be submitted to the Financial Aid Office/Rollins Hall 1st Floor.
 - To confirm my record has been changed, I should review my Leo-online tracking status for Title IV authorization.
 - **By signing this authorization I understand that a hold may be placed on my student account if an outstanding balance is owed to the University.**