

Signature of Student (required)

2025-2026 Student Authorization for Use of Title IV Financial Aid

	Submit securely online: ksu.edu/sfa/upload	Deliver in person: 119 Anderson Hall 919 Mid-Campus Drive North Manhattan, Kansas 66506-0107
Student's Name (Last, First, MI)		Wildcat Identification Number
Student's K-State Email Address		Student's Phone Number
your authorization to do so. For early or Perkins) or any federal grant (Potan be applied toward your non-round your no	xample, if you will be receiving any fed ell, SEOG, TEACH, Iraq and Afghanistal mandatory charges without your auth assed by Kansas State University and in	datory university charges unless you, the student, provide deral loan (Federal Direct Subsidized, Unsubsidized, PLUS in Service), then none of these forms of federal financial aid orization. clude such items as the purchase of athletic tickets, parking esidence hall phone, Internet, and cable), etc.
In view of the above, I provide my non-mandatory charges on my U contacting either the Kansas State	vauthorization to Kansas State Univers niversity account. Furthermore, I unde e University Office of Student Financia at my authorization or future rescissio	sity to apply any remaining federal financial aid to unpaid erstand that I may rescind this authorization at any time by I Assistance or the Office of Cashiers and Student on of this authorization will go into effect after submitting
Certification Statement By signing this form, I certify that	all of the information reported is com	plete and accurate.

Date