



Financial Aid Office  
1 College Hill Road  
Newton, NJ 07860  
973-300-2225  
Email: [finaid@sussex.edu](mailto:finaid@sussex.edu)

### TITLE IV Financial Aid Funds Consent to Apply to Student Account Balance

Student Name: \_\_\_\_\_

SCCC ID: \_\_\_\_\_ CU ID: \_\_\_\_\_

#### Instructions:

Students can elect to use TITLE IV financial aid funds (Pell Grants, Supplemental Educational Opportunity Grants and Direct Student Loans) and any other Sussex County Community College credit on account, including but not limited to HEERF funding, to satisfy a student's outstanding Centenary University account balance if the college/university has obtained the student's written affirmative consent. Your permission to authorize Sussex County Community College to pay Centenary University directly for these charges will expedite the settlement of your Centenary University student account. Please return the completed form in person to the Sussex County Community College Financial Aid Office or by email as outlined above.

#### TITLE IV FUNDS AGREEMENT:

I authorize Sussex County Community College to apply any credit balance, including but not limited to TITLE IV funds and/ HEERF funding, directly to the outstanding balance on my Centenary University student account for existing charges. I understand that this consent form will remain valid through the current academic year. Any change to this agreement, must be requested in writing to the Bursar's Office.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date