

Funds Release Authorization 2026/2027



This form is used when a student asks to use excess financial aid from the current term to pay a balance from a previous term in the last academic year. For example: a student may ask to use extra summer 2026 financial aid to pay a spring 2026 balance that has not yet been sent to collections.

Name _____ RCC ID _____

Phone Number _____

1. Prior-year charges from: Term _____ Year _____
2. Tuition/Fee Balance for prior year* \$ _____ ***NOTE: \$200 MAXIMUM**
3. Next enrollment term: _____ (Term) _____ (Year)
4. Number of anticipated credits (make sure FA matches): _____
5. Is Financial Aid awarded for the next term for which you wish to register? ___ Yes ___ No
(If "no", your request cannot be processed at this time.)
6. How much of next term's excess financial aid (after institutional charges are paid) do you wish to apply towards your prior-year tuition/fee balance? \$ _____ (Amount not to exceed \$200 if from prior academic year.)
7. I acknowledge the balance I wish to apply future excess aid to is \$200 or less and not in collections. My entire past due balance, minus the balance of \$200 or less, has been paid in full. I understand aid cannot be applied to late fees/penalties and any late fees/penalties must be paid in full prior to this form being submitted. ___ Yes

Student Certification: *I ask Rogue Community College to use the information above to pay my balance and apply my financial aid for the amount listed. If my financial aid changes after it has been applied to my charges, I understand that I may still owe money. I understand that my financial aid may be used to pay tuition, fees, or other approved non-institutional charges on my student account. I also understand that if my total charges are more than \$200, I must pay the extra amount beyond \$200 before any financial aid can be used to pay a balance from a previous year.*

Student Signature _____ Date _____

Submit this form by email to your [FinAid Advisor](#) or in person with a FinAid Advisor in [Rogue Central](#). Physical copies can be mailed to: RCC Financial Aid 3345 Redwood Hwy Grants Pass, OR 97527

FinAid Advisor Procedure for Funds Release Authorization Form

1. After student completes the form, verify they have a financial award for the term indicated and the anticipated number of credits on this worksheet matches what they are enrolled in for the next term.
2. If the prior year balance exceeded \$200, the student must pay the balance over \$200. Confirm the prior term (prior year) balance is less than or equal to \$200 prior to intaking the form.
3. Scan to the student's file.
4. Email the scanned document to ar@roguecc.edu. Shred the original or offer it to the student once scanned.

Collections Specialist Procedures for Funds Release Authorization Form

1. Check to confirm that prior-year balance is no more than \$200.00 and if so, the student has paid the difference.
2. Contact student within 48 hours and notify of eligibility or ineligibility.
3. If eligible, remove the financial hold.
4. After the initial post of financial aid, post a split payment adjustment to the student account moving up to \$200 from the requested term to the prior term.