



Office of Financial Aid

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Student Name (Last, First) Student ID Number

2025-2026 Authorization to Hold Title IV Credit Balance Form

A Federal Student Aid (FSA) credit balance is created when the total of all FSA funds credited to a student's account exceeds the total of tuition, fees, room, board, and other eligible educational charges on a student's account.

In accordance with Federal Regulations, Stephens College pays a credit balance to a student or parent (in the case of a Parent PLUS loan) as soon as possible, but no later than 14 calendar days after the balance is created.

This form is voluntary and allows a student or parent to retain an FSA credit balance and use it for future charges during the academic term. The Office of Accounting will hold the refund on your account and pay charges as they are posted to your student account.

A student or parent has the right to withhold their agreement from all or part of this authorization. If you elect not to authorize the College to hold your FSA credit balance, the funds will be paid to you (the student or parent as applicable) within the 14-day period noted above.

Note that if you elect not to sign this form or if you later cancel your authorization, you will be required to pay any outstanding charges to the College.

This authorization will remain in effect for each subsequent payment period unless you withdraw it. However, in no case, will Stephens College hold an FSA credit balance of loan funds beyond the end of the loan period, nor an FSA credit balance of other funds beyond the end of the last payment period in the award year for which the funds were awarded.

All remaining credits will be processed and refunded beginning in April of each year.

This authorization may be withdrawn at any time by submitting a signed statement to the Office of Accounting or the Office of Financial Aid.

If you withdraw your authorization, Stephens College will deliver any remaining credit balance to you within 14 days. Please note that your cancellation is not retroactive.

I voluntarily authorize Stephens College to hold and manage my FSA, or non-FSA credit balance as described above, and I acknowledge that interest will not be earned on these balances.

Student Signature

Date