



OFFICE OF STUDENT ACCOUNTS

o. (201) 684-7495 | f. (201) 684-7478

e. studentaccts@ramapo.edu | ramapo.edu/student-accounts

Revocation of Title IV Authorization Form

First Name

Last Name

Student ID Number

Email Address

I, the above named student, hereby withdraw my consent to pay certain charges, such as parking fees, book advances, fines, etc. on my student account with federal Title IV funds.

- The student understands that the charges no longer paid by Title IV funds need to be paid by the posted deadline in-full or via an authorized payment arrangement.
- The student understands that unpaid charges may result in late payment fees of \$200 each and/or deregistration from their courses as per College policy.

Cancellation of the Title IV Authorization begins on the date this form is completed and submitted to the Office of Student Accounts by the student and will not be processed retroactively. This request will be void if the student chooses to file another Title IV Authorization form at a later date.

Student Signature

Date of Signature

Please mail, email or fax this request to the contact information listed above. The Office of Student Accounts will process and accept your request to revoke the electronic consent of use of Title IV Funds. The staff member responsible for the acceptance will return a signed copy of this form to you at your Ramapo email address and will indicate the date the revocation took effect.

Revocation in effect as of: _____

Printed Name and Signature of Office of Student Accounts Representative

