



## FINANCIAL AID – PAYMENT DEFERMENT INSTRUCTIONS

[www.International.MissouriState.edu/StudyAway/](http://www.International.MissouriState.edu/StudyAway/)

If you currently receive federal, state, or institutional financial aid, you may be able to use some of all of your aid toward the cost of your Study Away program with an affiliate program provider. This includes, but is not limited to, scholarships, grants, and personal loans.

### PLEASE NOTE

This form should only be completed and returned by students who plan to use financial aid monies to pay for any portion of their Study away program costs and require deferring payments to their affiliate program provider. If you receive monies from a GI Bill, Veteran's Benefits, a 529 Plan, the Kauffman Scholars program, the Hagan scholarship, etc., please contact Study Away.

- **STEP 1:** Ask your Financial Aid Advisor to complete the [Financial Aid Verification Form](#) (page 2) and return it to you directly. You are responsible for providing the completed form to your affiliate program provider by their published deadline.
- **STEP 2:** Complete the [Agreement to Pay & Cancellation and Withdrawal Policy](#) (page 3) and provide it to your affiliate program provider by their required deadline. Your financial aid funds will not automatically be sent to your affiliate program provider and in most cases will be disbursed directly to you. If your aid is released AFTER you have already left for the program abroad, it is your responsibility to make arrangements for payment to be sent to your program provider. This may require the assistance of a third party (e.g. your parent/guardian).

### REMEMBER

It is your responsibility to ensure these forms are completed and returned to your affiliate partner by their required deadline.

Any balance that is NOT covered by your financial aid is due by the affiliate provider program's stated deadline.

For questions, contact your affiliate program provider.



## STUDENT FINANCIAL AID VERIFICATION FORM

www.International.MissouriState.edu/StudyAway/

**STUDENT:** Ask your Financial Aid Advisor to complete this form and return it to you directly.

**I. Please list the total amount(s) of financial aid awards that the student has accepted below:**

TYPE (e.g. Stafford loan)	AMOUNT (e.g. \$5,000)	ANTICIPATED DISBURSEMENT DATE & AMOUNT (e.g. August 27 / \$2,500   January 22 / \$2,500)
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>SUBTOTAL</b>	<input type="text"/>	

**II. Please list the dollar amount that the home university will be deducting from the SUBTOTAL**  
(including any and all tuition fee balances and study away fees assessed).

**AMOUNT**

**III. Please list the dollar amount that remains for the student to pay their program provider balance.**  
NOTE: Not all students will have funds remaining.

**AMOUNT**

**IV. Has the student completed all necessary financial aid documents and accepted financial aid listed above?**

Yes  No

**TO BE FILLED OUT BY THE FINANCIAL AID REPRESENTATIVE**

I confirm that the information provide on this form is complete and accurate to the best of my knowledge.  
The student will be responsible for notifying the affiliate provider of any updates or revisions to the awards listed above.

Representative's Name (please print):

Representative's Signature

Job Title

Date

Phone Number

Please scan the completed Page 2 and 3 of your affiliate provider Payment Deferment Paperwork to your affiliate program provider.



## AGREEMENT TO PAY & CANCELLATION AND WITHDRAWAL POLICY

[www.International.MissouriState.edu/StudyAway/](http://www.International.MissouriState.edu/StudyAway/)

Your affiliate provider allows financial aid students to defer the amount that financial aid will cover while requiring that the final financial aid payment is sent within two weeks of its disbursement. Failure to make payment by this date may result in suspension from the program, restriction from attending classes, and a hold on your transcript.

If a financial aid student cancels or withdraws from their program, they remain liable for any penalties as reflected in the affiliate provider's Cancellation and Withdrawal Policy. Penalty fees will be billed to the student and due immediately. Unpaid balances may be referred to a third-party collections service. **Please refer to the affiliate partner's website for your particular program's Cancellation and Withdrawal Policy.**

By signing below, I certify that I have read and agreed to the [Agreement to Pay & Cancellation and Withdrawal Policy](#).

Student's Name (please print)

Student's Signature

Date

### RESPONSIBLE THIRD PARTY

If financial aid funds will be disbursed to a third party (e.g., parent, guardian, school administrator) and that person will be responsible for payment of your program balance fee, please complete the section below.

Name of Responsible Third Party (Parent/Guardian)

Phone Number

Email Address of Responsible Third Party

Student's Signature

Date

Please scan the completed [Agreement to Pay & Withdrawal and Cancellation Policy](#) form to your affiliate program provider.