

State of Washington Higher Education Coordinating Board

Student Directive for Disbursement of State Student Aid

Return this form to University of Puget Sound Student Financial Services as soon as possible

Student Name (please print): _____ Puget Sound ID: _____

You have been awarded student financial aid from the State of Washington. These funds are being delivered to the university electronically by Electronic Funds Transfer (EFT). Your designation and signature on this form will allow the funds to either be applied directly into your student account or be given directly to you in the form of a check. A state grant recipient has the following two choices:

- 1. Deposited to your student account.** Choosing to have the funds deposited to your student account permits the aid to be automatically credited toward expenses you may owe to the school. This option allows faster processing of any refunds of financial aid proceeds that may be due you.
 I choose to have state student aid funds applied directly to my student account. These funds will be automatically credited toward expenses I owe University of Puget Sound.
- 2. Given directly to you by check.** Choosing to have state financial aid funds given directly to you means that state student aid will not be automatically available to pay for tuition and fees. You will be responsible for using the funds to pay for educational expenses including any expense you owe to the school.
 I wish to have state student aid funds given directly to me (not credited to my student account). I understand that I am responsible for all outstanding balances on my student account at University of Puget Sound.

Your choice will stay in effect as long as you are enrolled at this school. However, you may change your Directive for a future term by informing Student Financial Services in writing.

Student Signature: _____ Date: _____

Make sure you check one of the options above and return this form to:

University of Puget Sound
Student Financial Services
1500 N. Warner St. CMB 1039
Tacoma WA 98416-1039
FAX: 253-879-8508