

LA SIERRA UNIVERSITY
STUDENT FINANCIAL SERVICES
EDUCATIONAL ALLOWANCE
AUTHORIZATION FORM

School Year: 2009-2010

Tuition/Fees: \$24,573 Fall, winter, Spring (FWS)

STUDENT NAME: _____ ID#/SSN _____

Please Print Clearly

___ I will be doing Undergraduate course work ___ I will be doing Graduate course work. **I understand that the Teaching Credential program MUST be approved by my Conference for payment to be authorized.**

I plan to live: ___ on campus ___ off campus DOB _____

(Normally, on-campus pays 70% & off-campus pays 35% of tuition and standard fees. Please inform your aid counselor each quarter if your plans change)

PARENT INFORMATION

PARENT NAME: _____

ADDRESS/PHONE: _____
CityStateZipPhone

NAME OF CONFERENCE/UNION EMPLOYED BY: _____

Please check one: ___ Elementary School ___ Junior/High School ___ Administrative ___ Ministerial

EMPLOYER ADDRESS/PHONE: _____
CityStateZipPhone

This is to certify that I contribute more than 50% of the support for the above listed, never married, dependent child, that I claim him/her as an exemption on my federal income tax return and that he/she qualifies for the Educational Allowance.

Parent Signature / Date

CONFERENCE / UNION/ ACADEMY INFORMATION (To be completed by an official representative)

ELIGIBLE FOR EDUCATIONAL ALLOWANCE? YES NO

ELIGIBLE QUARTERS: Summer Fall Winter Spring

ELIGIBLE TO RECEIVE: 35% LSU tuition/fees 70% LSU tuition/fees other _____
(Please check only one. If the amount is different from La Sierra University's tuition & fees, \$24,573, please indicate on "other")

This is to certify that _____ is currently employed by _____ and that his/her dependent children are entitled to the Educational Allowance Benefit for the current school term according to our Educational Allowance Policy.

Please validate "Date of Birth" eligibility before signing this form.

Approval is given for: ___ Undergraduate Teaching Credential program ___ Graduate Teaching Credential Program
___ StudyTour

Date: _____
Signature of Authorized Official

Address: Street, City, State and Zip

Phone number

Please return this completed form to: Student Financial Services, La Sierra University, 4500 Riverwalk Parkway, Room 101, Riverside, CA 92515.
sfs@lasierra.edu. If you have any questions, please contact us @ (951) 785-2175. You may also fax us @ (951) 85-2942.

LSU Office Use

ORIGINAL—SFS Office

COPY—Bursar Office

COPY—Student

Received by: ___ Tracked by: ___ Tracking Code: EDUALL ___ Secondary Confirmation for Tour...call Conference/academy

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