

JOHNS HOPKINS

U N I V E R S I T Y

Office of Student Financial Services
Garland Hall/3400 N. Charles Street
Baltimore, MD 21218-2683
410-516-8028/FAX 410-516-6015
Website: www.jhu.edu/finaid

Student Aid Certification Form

Student Name:	
Student Social Security Number:	

Releases:

- If I am a recipient of federal financial aid funds, I authorize the crediting of these funds directly to my student account to cover any educational costs. If my student account has a credit balance, I authorize Hopkins to retain this balance to apply toward the next semester's expenses, or to cover minor prior-year charges.
- If my student account has a credit balance, I also understand that I may request a refund online at www.jhu.edu/studacct. All monies received in a refund must be used for educational expenses.
- The Office of Student Financial Services has my permission to release personal information (including grades) required by external and internal scholarship donors.
- I understand I must reapply for financial aid each year, and that it is my responsibility to obtain materials and adhere to the deadlines set by the Office of Student Financial Services.

Student Signature: _____

Date: _____

Your signature indicates acceptance of these releases. Acceptance of these releases allows us to provide timely, more efficient service to you. However, you may opt out of any of these at any time with a written notice to our office.