



**Student Section**

*This form serves as official notification to Arcadia University of financial aid funds being processed by your home institution to be applied toward your Arcadia balance. Arcadia will defer your balance up to the total disbursement amount indicated below until 10 days after the disbursement date. You are responsible to pay any remaining balance by the final payment date. Arcadia's final payment deadlines are available at [studyabroad.arcadia.edu/payment](http://studyabroad.arcadia.edu/payment) under Payment Options and Due Dates. You are ultimately responsible for payment of the full program fee including any promised aid that is not received. You do not need to submit this form if you are not receiving financial aid or if your program fee will be billed to you by your home institution. Completing this section authorizes the release of financial information to Arcadia University for the purpose of evaluating your student account.*

_____	_____	M. _____
<i>Student Last Name</i>	<i>First Name</i>	
_____	Study Period: <input type="checkbox"/> Acad. Year	_____
<i>Arcadia Program</i>	<input type="checkbox"/> Fall	<i>Year</i>
_____	<input type="checkbox"/> Spring	
<i>E-mail Address</i>	<input type="checkbox"/> Summer	
_____	<input type="checkbox"/> J-Term	
_____	_____	_____
<i>Student's Signature</i>		<i>Date</i>

**Financial Aid Administrator Section**

*Completion of this section by the homeschool financial aid office verifies that the information provided is accurate as of the endorsement date. Arcadia University's study abroad fees are available at: [studyabroad.arcadia.edu](http://studyabroad.arcadia.edu)*

_____	_____
<i>Administrator Last Name</i>	<i>First Name</i>
_____	_____
<i>Title</i>	<i>Institution</i>
_____	_____
<i>E-mail Address</i>	<i>Phone</i>
_____	_____
<i>Administrator's Signature</i>	<i>Date</i>

Type of Funding	Disbursement Date	Disbursed To	Amount
_____	_____	<input type="checkbox"/> Arcadia <input type="checkbox"/> Student	_____
_____	_____	<input type="checkbox"/> Arcadia <input type="checkbox"/> Student	_____
_____	_____	<input type="checkbox"/> Arcadia <input type="checkbox"/> Student	_____
_____	_____	<input type="checkbox"/> Arcadia <input type="checkbox"/> Student	_____
_____	_____	<input type="checkbox"/> Arcadia <input type="checkbox"/> Student	_____
_____	_____	<input type="checkbox"/> Arcadia <input type="checkbox"/> Student	_____

**TOTAL Disbursement Amount:** \_\_\_\_\_

Questions about this form can be directed to Jennifer Darvas, Student Accounts and Financial Aid Administrator, by telephone (866-927-2234 x2148) or e-mail at [darvasj@arcadia.edu](mailto:darvasj@arcadia.edu). When both sections are complete this form should be faxed to (215) 572-2174 or emailed to [darvasj@arcadia.edu](mailto:darvasj@arcadia.edu).