

**CAL GRANT B AUTHORIZATION  
FORM 2024-2025**

In accordance with state regulations, ArtCenter must have a student's written authorization to credit the Cal Grant B Access award to a student's account.

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Last Name

First Name

Student I.D.

**Please check ONE of the following options:**

- I authorize the use of my Cal Grant B Access award to be applied to the outstanding balance on my student account. I understand that this authorization can be rescinded at any time.
- I do NOT authorize the use of my Cal Grant B access award to be applied to my account balance (if any) and that the access award be paid directly to me. I understand that I am responsible for any remaining balance for tuition or fees at ArtCenter. I understand that this request applies to the current year only and that I will need to submit this form each year.

**Cancel previous authorization for payment (*Complete this section only if you are requesting a change to a previous authorization request*):**

- I am requesting to CANCEL my previous authorization; I now authorize to have my Cal Grant B Access award be applied to my student account balance.

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Student Signature

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Date

Please return this form to the Financial Aid office in person or via Dropbox, for your funds to be released on time.

**Dropbox instructions:** upload to our secure Dropbox location via this link:

<https://www.dropbox.com/request/Y7dVOIEJood9056kdyZi>

**\*Important** - Please name your file using the following format: LastName, FirstName StudentID#, DocumentName.pdf

**Need help with uploading?** Review instructions at: <https://inside.artcenter.edu/pub/mod/resource/view.php?id=813>