



Grayson College Financial Aid  
**Past Due Payment  
 Authorization 2026-2027**

Return completed and signed form to:  
 Email: [financialaid@grayson.edu](mailto:financialaid@grayson.edu)  
 Fax: 903.463-3908  
 Grayson College Office of Financial Aid, 6101  
 Grayson Dr., Denison TX 75020

\* = Required field

**Student Information**

Student Name\*: \_\_\_\_\_ Email\*: \_\_\_\_\_  
 Student ID\* \_\_\_\_\_ Phone Number\*: \_\_\_\_\_  
 Date of Birth (m/d/yyyy)\* \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

**Student Address**

Street Address\*: \_\_\_\_\_  
 City, State, and Zip Code\* \_\_\_\_\_

**Past due balance request for the current academic year**

I understand I have a past due amount/R2T4/Grant Overpayment for the **CURRENT** academic year. If this past due payment authorization is approved, I authorize Grayson College to deduct the balance from my current financial aid awards.

Amount: \_\_\_\_\_ From Term/Year \_\_\_\_\_ For Term/Year \_\_\_\_\_

**Past due balance request for a past academic year**

I understand I have a past due amount/R2T4/Grant Overpayment for the **PREVIOUS** academic year. If this past due payment authorization is approved, I authorize Grayson College to deduct up to \$200 from my current financial aid awards.

From Term/Year \_\_\_\_\_ For Term/Year \_\_\_\_\_

**I understand I am required to pay the prior year balance down to \$200 and provide a receipt in order for this authorization to be processed.**

**Signatures**

Student Printed Name\*: \_\_\_\_\_

Student Signature\* 

|   |  |
|---|--|
| X |  |
|---|--|

 Date (mm/dd/yyyy)\* \_\_\_\_\_

**Statement of Non-Discrimination/Equal Opportunity Policy**

With respect to the admission and education of students; with respect to the availability of student loans, grants, scholarships, and job opportunities; with respect to the employment and promotion of teaching and non-teaching personnel; and with respect to the student and faculty activities conducted on the premises owned or occupied by the College, Grayson College shall not discriminate either in favor of or against any person on account of race, creed, color, gender, national origin, age, religion, or disability. GC does not discriminate on the basis of sex in the educational programs or activities it operates. Inquiries concerning the application of Title IX and its implementing regulations may be referred to the Title IX Coordinator or to the Office of Civil Rights. The Title IX Coordinator is the Director of Title IX and Student Conduct. 6101 Grayson Drive, Denison, Texas 75020, 903.415.2614

**Office Use Only**

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Current Awards: \_\_\_\_\_ Current Bal: \_\_\_\_\_ Past Due Bal: \_\_\_\_\_ Remaining Amt: \_\_\_\_\_

SAP:  Good  AP  Warn  Susp.

Docs Complete:  Yes  No

Approved  Denied

Processed By: \_\_\_\_\_ Date: \_\_\_\_\_

Notes: