



## Student CRRSAA Authorization Consent Form

Student's Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

I, \_\_\_\_\_ consent to Lake Superior State University's use of my Coronavirus Response and Relief Supplemental Appropriations Act, 2021 (CRRSAA) grant to pay toward my student account balance for either Fall 2020 or Spring 2021 educational expenses. I understand my eligibility or receipt of the funds is not contingent on this consent.

By choosing not to accept the CCRSAA Relief funds to assist with my account balance, I understand I will still receive the monies, issued directly to me via direct deposit or check. I will still be responsible for any outstanding charges owed to Lake Superior State University- which can prevent registration, transcripts, receiving my diploma, or cause collection activity. I am confident that my mailing address and/or banking information with Lake Superior State University is up to date in order to receive the funds directly.

Choosing this option means that your CRRSAA funds will first apply to your current student account balance. If a credit balance is created, a refund will generate to you.

I authorize Lake Superior State University to apply CRRSAA Relief funds to my student account balance for Fall 2020 or Spring 2021 educational expenses.

Yes  No

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this form by March 19, 2021** to the Lake Superior State University Financial Aid Office via scan/picture/email or drop off only. We will accept them over the counter, or via email ([finaid@lssu.edu](mailto:finaid@lssu.edu)).