Student Request for an Advance of Anticipated Excess Financial Aid

In accordance with federal regulation 34 CFR 668.164(m), schools must provide a way for federal student aid recipients to obtain or purchase books and supplies 10 days before the beginning of the payment period. At Empire State University, we meet this regulation by providing eligible students with a bookstore voucher that can be used on our bookstore vendor website – Missouri Book Services (MBS), a subsidiary of Barnes & Noble College Booksellers. Please visit https://www.sunyempire.edu/Bookstore for more information regarding book purchases.

If you need to purchase books and/or supplies through an entity other than MBS, and would like to request an advance of your anticipated excess financial aid to do so, please complete this form. Incomplete or unsigned applications will not be considered. **Limit one request per student, per term**.

Name: _____ **Student ID Number (not your SSN):** B0_____

Note: Your student ID can be found when you log into Self-Service Banner from the Student Accounts page at My.SUNYEmpire.

Term: _____

Please indicate the reason for your request (*check all that apply*):

- ☐ Books Amount Requested: $_____
- ☐ Educational Supplies Amount Requested: $_____

Note: Student Accounts may ask you to provide supporting documentation regarding your amount(s). Requests for educational supplies will be capped at $275.

Please indicate why you are not utilizing MBS (*check all that apply)*:

- ☐ Required book(s) and/or supplies are not available at MBS
- ☐ Required book(s) are on backorder at MBS
- ☐ Items available at a more favorable cost. Please indicate retailer or seller: _____
- ☐ Required book(s) and/or supplies available do not meet accessibility need or preference

By signing this application, I have read the advance of anticipated excess financial aid terms and conditions as defined at https://www.sunyempire.edu/go/aidadvance. I certify that I am currently registered, in good academic standing, do not have an account balance and have authorized aid in place that exceeds my term charges. I acknowledge approved funds will be used for books and/or supplies. I authorize the university to deduct the amount of the approved advance from my financial aid funds for repayment to SUNY Empire. I agree that I am responsible for any balance owed that may occur if my enrollment status changes, I fail to attend or withdraw from any or all of my studies, or if I fail to maintain good academic standing. I agree to pay back the advance if my financial aid is reduced or cancelled for any reason.

Signature of applicant _____**Date**_____

Please submit this form to Student Accounts at StudentAccounts@sunyempire.edu, Empire State University, 111 West Ave., Saratoga Springs, NY 12866-6069 or fax it to 518-580-4790. Review of applications begins 2-3 weeks prior to the term start date. Applications received before that date will be held until that time. Applications must be received by 12 p.m. EST on deadline dates to be eligible for review. The deadline schedule is available at https://www.sunyempire.edu/go/aidadvance. If approved, your account will be charged for the amount of your advance. Your advance will be processed through BankMobile Disbursements by the refund method you have selected. You will be notified by email if your application is denied. Please visit www.sunyempire.edu/Refunds if you have any questions or email us at StudentAccounts@sunyempire.edu.

Rev 03/22/2023