



## Request to Move Charges Forward on Student Account

**\*\*Under Federal Guidelines, the total amount of charges moved from one term to another cannot exceed a total of \$200\*\***

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ WVNCC Email: \_\_\_\_\_

Amount to be moved forward\*\*\$ \_\_\_\_\_ From term \_\_\_\_\_ to \_\_\_\_\_

\*By Signing below, I must attend class to maintain eligibility to receive funds that have not yet been credited to my account to cover this past-due balance. If I fail to attend or am administratively withdrawn, I understand that I will be responsible for this total balance, any past balance not covered by this change in term due, and the balance I have accrued for the current term. Any financial aid that does not cover my total outstanding balance with WVNCC will be paid in full or in accordance with any payment plan for which I opt into. Failure to meet my financial obligations will result in withholding of College services including but not limited to grades, transcripts (official and unofficial), and ability to register for any future classes. If I have questions regarding this document, I have spoken with a Financial Aid and Business Office Representative and they have clarified any questions I had regarding payments, financial aid and balances moving forward.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

### OFFICE USE ONLY

<b>Financial Aid Office</b>		
Financial Aid Funds Available?	Y/N	Amount approved _____
Signature of Financial Aid Office Official _____		Date _____
<b>Business Office</b>		
CFO Approved?	Y/N	Amount approved _____
Signature of Chief Financial Officer _____		Date _____
Date Received for Processing _____		Date Entered in Banner _____
Signature of Business Office Official _____		Date _____