



St. Vincent's College
Financial Aid Department
2800 Main Street
Bridgeport, CT 06606
Phone: (203) 576-5756
Fax: (203) 576-6063

Bookstore Voucher Request Form

Student's Name: _____ Student ID Number: _____

Semester for which book voucher is being requested for: _____ Year: _____

Requested amount: \$ _____

Student's Signature: _____ Date: _____

- ◆ Please be advised that the amount approved is subject to the available funds in financial aid. As a result, request amount may change upon financial aid review.
- ◆ Student understands that by signing this form, he or she authorizes the use of financial aid funds to pay for books.
- ◆ In order for students to be eligible for a book voucher, student must be registered at the school and have eligible financial aid funds on account.
- ◆ IF your financial aid is reduced or removed after the issuing of this voucher; you will be fully responsible for the amount requested.
- ◆ Book voucher will only be valid for current semester.

Process:

Please complete form and have it submitted to the Department of Student Accounts. Forms will then be submitted to financial aid for reviewing and approval. Whether approved or declined, students will be notified via email. If approved, students will be notified by the online bookstore, so books can be ordered. Completed forms should be submitted to studentaccounts@stvincentscollege.edu, cc Dorothy.Martin-Hatcher@stvincentscollege.edu or faxed to (203) 576-6063. Bookstore Voucher Form can also be dropped in person at the Student Accounts Department Office located at the Hunting Street Building located on the third floor.

Official Use Only:

Approved Declined

Amount Approved: \$ _____ Date: _____

Reviewed By: _____ Approved by: _____