Texas Tuition Promise Fund®

Benefits Authorization Form

For Texas Public Colleges and Universities

TEXAS TUITION PROMISE FUND®
A Prepaid Plan as Smart as You Are

Instructions

Please use this form to authorize the redemption of Tuition Units (benefits) at a **Texas public college or university ONLY**

- In order for a school invoice to be processed and contract benefits to be paid to a Texas public college or university, the Purchaser must provide authorization to the Texas Tuition Promise Fund (TTPF)
- The Purchaser must specify the Texas public college or university, as well as the academic year and term, for which authorization is being provided
- Benefits Authorization is required to be submitted ***every semester*** **even if the Beneficiary attends the same college or university each semester**
- Your Beneficiary **must already be registered** at the designated school for the term and academic year being authorized ***prior*** to submitting this form
- Visit **www.texastuitionpromisefund.com** to
  - View/download the Student Handbook for details on using TTPF benefits
  - View FAQs on how to use TTPF benefits
  - View the most recent Tuition Unit Value redemption charts included at the back of the Academic Year Tuition Unit Pricing Schedule located under Forms & Literature on the website

Forms can be downloaded from our website, or you can request a form by contacting a Customer Service Representative at **1.800.445.GRAD (4723), Option 5.**

Return this Form and any other required documents to

Texas Tuition Promise Fund
P.O. Box 44305
Jacksonville, FL 32231-4305

Fax: **1.800.519.4652**

SECTION I. | Purchaser Information

Please enter the Purchaser information below:

Texas Tuition Promise Fund (TTPF) account number

Name of Purchaser (first, middle, last, including suffix)

Purchaser's Social Security or Taxpayer ID number

Street address (number and street, including apartment number)

City | State | Zip

( ) Home telephone number | ( ) Daytime telephone number

Email address

SECTION II. | Beneficiary Information

The Beneficiary is the person designated on the account for which you are authorizing use of Tuition Units to pay tuition and required fees at the **Texas public college or university indicated in Section III for the semester and academic year indicated in Section III.**

Please complete the following information about the Beneficiary:

Last name (including suffix) _____ First name _____ M.I. _____

Beneficiary's Social Security or Taxpayer ID number _____

Street address (number and street, including apartment number) _____

City _____ State _____ Zip _____

( )
Telephone number _____

Email address _____

SECTION III. | Authorize Redemption of Tuition Units and Payment to Designated Texas Public College or University

The Purchaser must submit this form each semester to authorize use of TTPF benefits at a Texas public college or university—even if the Beneficiary attends the same college or university each semester.

Indicate the Texas public college or university to which benefits are to be paid:

School name _____

School campus/location (example: University of Texas—Dallas) _____

School address (number and street) _____

City _____ State _____ Zip _____

Provide the term and academic year for which you are authorizing benefit payments for the above institution:

Term (select one):
- ◯ Fall
- ◯ Spring
- ◯ Summer (Full semester)
- ◯ Summer 1 (First half of semester)
- ◯ Summer 2 (Second half of semester)

Academic Year: _____
(For instance, you may have selected Fall above for the 2012 Academic Year.)

Provide your Beneficiary's student identification number provided by the above school:

Student identification number _____

- A student identification number is the identification number assigned to a student upon first entering or registering with an educational institution and is used to identify the student in lieu of a name or Social Security number for grades, essays, projects, exams and official documents
- This information is required for submitting authorization for TTPF benefit payment to a Texas public college or university. If you do not have the number, please contact the school the Beneficiary will attend to obtain the student identification number so that payment will be applied properly

You can limit the number of Tuition Units to be redeemed for your Beneficiary for the Academic Year and Term specified above by completing the following:

◯ I want to cap the number of Tuition Units to be redeemed at _____ (enter number).

SECTION IV. | Purchasers with Multiple Contracts for the SAME Beneficiary

Important:

- This section is only applicable to Purchasers with multiple accounts (contracts) for the **SAME** beneficiary
- If the Purchaser has multiple accounts (contracts) for the SAME beneficiary that have mature Tuition Units available for redemption, please complete the following:

Do you want to authorize usage of all accounts you own for this Beneficiary with mature Tuition Units available for redemption as necessary to cover the tuition and required fees invoiced to TTPF by the school in which your Beneficiary is enrolled, up to the number of Tuition Units available?

◯ Yes, apply this authorization to all of my accounts with available (mature) Tuition Units for this Beneficiary. I understand that you will use all available Tuition Units necessary to cover the total amount billed by the school for tuition and required fees covered by the plan up to the number of Tuition Units available, if necessary.

◯ No, apply this authorization only to this contract.

SECTION V. | Signature

I confirm that I am the Purchaser of the account indicated above and certify that the information I have provided, with respect to my Texas Tuition Promise Fund (TTPF) account is true, complete, and accurate. I acknowledge that I have received, read, and agree to the terms set forth in the Plan Description and Master Agreement.

By signing below, I acknowledge my understanding that TTPF pays only tuition and required fees at Texas public colleges or universities up to the amount of available Tuition Units on the account indicated above. Further, I understand that any additional amounts due to the school for tuition and fees not paid by TTPF are the full responsibility of either the Purchaser or the Beneficiary and must be paid by the deadline set by the school or the classes may be cancelled or the school may impose a penalty for late payment. I further understand that any refunds related to dropped classes after the school has billed TTPF, are between the Beneficiary and the school and that no Tuition Units will be restored to the account(s) designated above as a result of dropped classes after the school has billed TTPF.

X _____ _____

Signature of Purchaser Date