



Bursar's Office - Skyhawk Card Services 116 Administration Building Martin, Tennessee 38238

o Verify TVAAUTH is authorized

Initials: ____ Date: ____

Name:	ID #:
Phone:	
Address:	
I would like \$ (amount of my financial aid for a Book Adva (A maximum of \$750.00 can be applied per semester.)	nce) to be applied to my Bookstore Account.
understand that the Book Advance is being provided to me by UT Martin as an advance, solely to be used for the purpose of purchasing textbooks prior to my Financial Aid disbursement. Accordingly, I agree and promise that I will repay any or all of the Book Advance that is not recovered by UT Martin upon the receipt by UT Martin of my Financial Aid funds. I understand that I am responsible personally for the repayment in full of the Book Advance, even if I fail to enroll in classes, cancel my classes, withdraw from UT Martin, cancel or terminate my Financial Aid, or file bankruptcy. To apply for more than \$750.00, submit a book cost estimate from Barnes and Noble to the Bursar's Office.	
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By signing this document you authorize Skyhawk Card Services to transfer the requested amount of funds from your Financial Aid for a Book Advance to your Skyhawk Card. Your signature also verifies you have read and agree to the above statement.	
Signature	Date
	For Office Use Only:
	o Verify Available Balance in Banner
	o Verify "Confirmed" in Banner o Added Charge to Banner TSADETL-Deposit
	1 0 Maded Charge to Darrier 13ADE 12-DEDUSIL