TO: The Oklahoma State Regents for Higher Education  
Oklahoma Tuition Aid Grant Program  
Post Office Box 108850  
Oklahoma City, Oklahoma 73101-8850  

(Name of Institution) desires to participate in the Oklahoma Tuition Aid Grant Program whereby its eligible students may be able to receive grants under provisions of State and Federal laws relating to the program.

Therefore, I have designated (Name of Official) (Title) as a bonded official of this institution to make official certification as to eligibility of applicants for participation in the program, verify enrollments and attendance, receive and disburse funds to students taking receipt therefor, and perform such other duties as may be necessary for the proper administration of the Oklahoma Tuition Aid Grant Program consistent with State and Federal laws and regulations.

(Signature of President/Chief Administrator) (Date)

(Signature of Official Being Authorized) (Date)

_________________________________________ (e-mail address of Authorized Official)

_________________________________________ (office telephone number with extension)

NOTE: An institution can have multiple authorized representatives; however one representative must be identified to receive any single mailings. If you are authorizing more than one representative, you can attach a list of names and original signatures to one authorization form, thereby requiring only one signature by the President/Chief Administrator.