



FINANCIAL AID EMPLOYEE CODE OF CONDUCT

As a Financial Aid employee, I understand that I MUST:

1. Always Be **ETHICAL** and conduct myself with **INTEGRITY**.
2. **AVOID** any conflicts of interest and comply with the Artistic Academy of Hair Design policies
3. **PROVIDE** potential and enrolled students with accurate and complete financial aid information and policies.
4. **MAKE** every effort to assist potential and enrolled students with financial aid.
5. **EDUCATE** students and families about financial aid through quality consumer information.
6. **KEEP** student information confidential and comply with the Family Educational Rights and Privacy Act (FERPA) as defined in the school Catalog.
7. **COMPLY** with applicable federal and state laws and regulations, accreditor regulations and Artistic Academy of Hair Design policies and procedures.
8. **ADHERE** to all policies and procedures set forth by Artistic Academy of Hair Design.

As a Financial Aid Employee, I understand that I MUST NOT:

1. **ASK** prospective, enrolled or former students for their FSA ID or password.
2. **MAKE** statements that contradict information in the school Catalog, Policies and Procedures or Enrollment Agreement.
3. **DISCUSS** financial information of a potential, enrolled, or former student with any a third party unless the student has provided a signed release in accordance with FERPA.
4. **COMPLETE** or **SIGN** any document on behalf of a potential, enrolled, former student, parent/guardian or cosigner including:
 - a. FSA ID, FAFSA, Parent PLUS Loan, Master Promissory Note or other financial documents
 - b. Initialing any document on behalf of student and/or parent/guardian
 - c. Using white-out of any kind on a document, and
 - d. Modifying or altering information provided by a student and/or parent/guardian
5. **PROVIDE** inaccurate information, exaggerated statements or make explicit or implicit promises about:
 - a. Criteria for financial aid eligibility
 - b. Availability or amount of financial aid funding
 - c. Interest rates for student loans
 - d. The school's programs, facilities, student services and jobs
 - e. The school's graduation and placement rates
 - f. Transfer of hours to or from other schools
 - g. Credentials or licensing a student may obtain
 - h. Potential income earning levels upon graduation
6. **PAY** the enrollment/application fees of a prospective, enrolled, or former student or **LEND** or give money to a prospective, enrolled, or former student.
7. **RECOMMEND** a specific program to take when discussing how it may affect a student's financial aid eligibility.

8. MISAPPLY payments, or steal, embezzle, or wrongfully take any money belonging to a student.
9. ACCEPT improper payments from any person or entity.
10. AWARD or APPLY payments to myself or family members.

As a Financial Aid Employee, I further COMMIT that I will:

1. Frequently re-read the school Catalog and this Code of Conduct to ensure that I am familiar with all of their requirements and/or contents.
2. I will keep up to date with all laws, rules and regulations that affect student eligibility, the financial aid process, and student loans. This includes formal training, webinars, visiting approved sites and reviewing current handbooks.
3. Immediately contact the Director if I have any questions about the school Catalog or this Code of Conduct.
4. Immediately notify the Director if I believe any employee is violating this Code of Conduct.

Artistic Academy of Hair Design is committed to ensuring the integrity of its employees and students with respect to all aspects of its school and operations. Compliance with all applicable laws, regulations and the school's policies and procedures, and high levels of performance and integrity is expected of all employees.

This Financial Aid Employee Code of Conduct applies to all employees employed in a financial aid position. Any violation of said provisions will be just cause for disciplinary measures, up to and including termination.

Financial Aid Employee (name): _____

Date: _____

Financial Aid Employee (signature): _____

Date: _____

Director: _____

Date: _____