

Financial Aid & Scholarships

1700 Spartan Drive, Elgin, IL 60123-7193

Location: B156

Phone: 847-214-7360 Fax: 847-608-5460

Email: financialaid@elgin.edu

2022-2023 Institutional Aid Application & Permission to Credit

STUDENT CERTIFICATION

Name	ECC ID or SS #
1 tame	

Use blue or black ink to complete this form

- I understand I may not receive financial aid for a course that is not required for my financial aid eligible academic program at ECC.
- I understand I may not receive financial aid from two schools during the same academic term.
- I understand the use of Federal Title IV funds I receive are solely for expenses related to attendance at ECC.
- I understand ECC may cancel any or all financial aid if conflicting information is given and/or if I do not complete required paperwork.
- I am not currently in default of any Title IV Federal aid nor owe any federal grant repayments. If this changes any time during the award year, I will notify the ECC Financial Aid office.
- I understand in order to receive some forms of aid (loans, work study, certain grants/scholarships), there are enrollment restrictions.
- I understand that if I withdraw from any or all classes, my financial aid may be reduced and/or I may lose financial aid eligibility.
- I understand that it's my responsibility to drop a class(es) that I do not plan to attend regardless of my financial aid status. For information regarding refunds associated with dropping a class, please refer to the ECC refund policy at elgin.edu/refunds.
- I understand I am required to meet and maintain Financial Aid Satisfactory Academic Progress (SAP) standards.
- I understand if my residency changes financial aid may not be enough to cover all charges.
- I understand if my charges exceed my financial aid award, I will be responsible for any outstanding charges.
- In order to receive financial aid, I understand that I must be actively pursuing completion of courses in which I am enrolled.
- I understand my financial aid may not pay for repeated classes.
- I understand I may only receive financial aid for 30 hours of remedial coursework.
- I agree to deposit/cash all financial aid refund checks within 90 days of the check date, otherwise the excess will be returned to the U. S. Department of Education.
- I understand that if I make schedule changes, ECC may adjust my state and federal aid up through the 50% point of the term. I understand that after the 50%, I still may have adjustments made to my aid if I never attend the class(es) or am dropped by my instructor with a last day of attendance prior to the 50% point.

I am responsible for reading the terms and conditions stated above, as a part of receiving financial aid from Elgin
Community College. I affirm to the best of my knowledge that the information submitted herein is complete and correct

Student's Signature _

Date

^{*} Electronic Signatures will not be accepted

STUDENT INFORMATION			
First Name	Last Name	ECC ID#	
		/ Phone #:	
(Note: SS# must be on file with the Registration	& Records office)		
Address:	City:	State:	
1. Have you attended another college	during the 2022-2023 school year?	☐ Yes ☐ No	
If you marked yes, indicate the s	emester aid was received: Summ	ner 2022	
	ENROLLMENT INFORMA	<u>TION</u>	
Your financial aid will be estimated by to receive federal student loans.	ased on your intended enrollment. Y	ou must be enrolled in at least six credit hours	
My estimated enrollment status for	the 2022-2023 school year (please o	check one box for each semester):	
Summer 2022 (June-August) FT (12+ hours) 3/4 time (9-11 hours) 1/2 time (6-8 hours) Less than 1/2 time (<6 hours) Not attending If no enrollme	FT (12+ hours) 3/4 time (9-11 hours) 1/2 time (6-8 hours) Less than 1/2 time (<6 hours) Not attending nt status is listed, you will be awarde	FT (12+ hours) 3/4 time (9-11 hours) 1/2 time (6-8 hours) Less than 1/2 time (<6 hours) Not attending d at fulltime enrollment.	
PERMISSION TO CREDIT STUDENT ACCOUNT WITH FEDERAL STUDENT AID 2022-2023			
Colleges must obtain written permission or less and other educationally related To grant permission, check item 1.	d charges (such as books). You are no		
1 I grant ECC permission to u	, , , , , , , , , , , , , , , , , , , ,	v educationally related charges to my account.	
	•	s to pay educationally related charges to my 0 or less, ECC Child Care charges, etc.	
I understand that I may modify or can Office in writing. Cancellation of this		ing the ECC Financial Aid & Scholarships terms.	
Student Signature			

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