

The Student Agreement and Acknowledgement Form must be submitted to the Financial Aid Office prior to the evaluation of your financial aid application.
***Note: This is not an application for a student loan! Additional paperwork is required to process your loan request. See your FA Office.**

SECTION 1: STUDENT INFORMATION

NAME _____

HCC STUDENT ID # _____

LAST 4 OF SSN _____

MAILING ADDRESS _____

DATE OF BIRTH _____

CITY, STATE, ZIP

(_____)

EMAIL ADDRESS _____

HOME PHONE _____

CELL / WORK PHONE _____

Current Housing Status?

With Parents

Not With Parents

Indicate your home campus?

Brandon

Dale Mabry

Plant City

Ybor City

South Shore

SECTION 2: CERTIFICATION/AGREEMENT STATEMENTS

To ensure that you are familiar with your academic progress requirements and how your financial aid funds are utilized, please read the statements below and initial all boxes to confirm your awareness of this information.

Satisfactory Academic Progress

I am aware that I must maintain a cumulative grade point average (GPA) of 2.0 and must have successfully completed the minimum number of hours at the enrollment level for which I received financial aid to ensure continuation of financial aid. I am also aware that I must complete my program within a 150 percent time frame of the published length of the program. I also understand that a 2.00 GPA is required for graduation from any program. Failure to meet these standards may result in the termination of my financial aid eligibility at HCC.

Use of Financial Aid Funds

I certify that I will use all Federal and State financial aid only for related educational expenses as defined by my cost of attendance at Hillsborough Community College.

Release of Other Funds

I authorize Hillsborough Community College to use my financial aid funds to pay for institutional costs other than tuition and fees. This includes charges at the bookstore, day care center, on-campus housing, meal plan, parking and library fines. I also authorize HCC to use my 2008-2009 financial aid to pay any charge on my account from previous attendance. I understand that this authorization can be rescinded at any time by submitting a written request to the Financial Aid Office.

If I withdraw prior to the disbursing of my Financial Aid Funds, I give permission to utilize the prorated award to pay for institutional charges. If there is a remaining balance, I am requesting the college to release the funds to me.

If I officially or unofficially withdraw from all classes prior to completing 60% of the semester, I understand that I am obligated to repay a percentage of the Title IV funds received.

Signature _____ Date _____