



SOUTH
SUBURBAN
COLLEGE

FINANCIAL AID CERTIFICATION

Last Name: _____ First Name: _____ SSC ID: _____

Instructions: Please read each statement carefully and initial each line item to confirm your understanding

1. _____ I am not currently in default of any Title IV Federal aid, nor owe any federal grant repayments.
2. _____ I understand if I drop/withdraw from any or all classes, my financial aid may be reduced.
3. _____ I understand that it is my responsibility to drop a class(es) that I do not plan to attend, and to avoid being charged, I must drop within the established published dates.
4. _____ I understand I may not receive financial aid for a course(s) that is not required for my degree completion at SSC.
5. _____ I understand I may not receive financial aid from two schools during the same semester.
6. _____ I understand that I must submit all required or additional documentation requested by SSC financial aid office and my failure to do so, will result in the cancellation of my financial aid.
7. _____ I understand in order to receive some forms of aid (work -study, grants and scholarships), there are enrollment restrictions.
8. _____ I understand that not all classes or programs are eligible for financial aid.
9. _____ I understand if my charges exceed my financial aid award, I will be responsible for any outstanding charges.
10. _____ I understand I may only receive financial aid for 30 hours of remedial coursework.
11. _____ I understand that I am required to maintain Satisfactory Academic Progress (SAP) standards. This includes maintaining a minimum of 2.0 cumulative grade point average (GPA), completing 66.67% of the total attempted course hours, and not exceeding the 150% maximum time frame to complete my degree/certificate.

My signature below certifies that I fully understand the information on this form will comply with the stated guidelines.

Student Signature

Date