

## FINANCIAL AID CERTIFICATION

_ast Name: <sub>_</sub>	First Name:	SSC ID:	
Instructions:	Please read each statement carefully and initial each	n line item to confirm your understanding	
1	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	erstand 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	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	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	understand in order to receive some forms of aid (work -study, grants and scholarships), there are enrollment estrictions.		
8	I understand that not all classes or programs are eligible fo	understand that not all classes or programs are eligible for financial aid.	
9	understand if my charges exceed my financial aid award, I will be responsible for any outstanding charges.		
10	l 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.		
y signature belov	v certifies that I fully understand the information on this form wil	comply with the stated guidelines.	
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	Student Signature	Date	