



MIRACOSTA COLLEGE
FINANCIAL AID TERMS & CONDITION

Office Use Only

FAMISC
Note: FTC

Student Name: _____

Student ID#: _____

Are you attending any other schools during this academic year? Yes ____ No ____

If Yes, do you want financial aid only from MiraCosta College? Yes ____ No ____

(Federal regulations prohibit students from receiving financial aid from more than one school at the same time.)

Financial Aid recipients are responsible for understanding and agreeing to the following terms and conditions. INITIAL (do not use checkmarks) that you have read, understand and agree to each item. Sign this agreement and submit to the Financial Aid Office.

I understand that the initial financial aid offer is based upon anticipated full-time enrollment (12 units or more) for the academic year. I understand that payments will be adjusted for three-quarter time, half-time, and less-than-half-time enrollment based on actual units enrolled as of the add/drop deadline.

I understand that the initial financial aid offer is based on the information I provided on the Free Application for Federal Student Aid (FAFSA). I further understand that financial aid eligibility may change as a result of information that I provide the Financial Aid Office.

I have read and understand the MiraCosta College Satisfactory Academic Progress (SAP) Policy. I understand that this policy is consistent with federal guidelines and requires that I meet the specified pace of progression percentage of units completed to units attempted, maintain the specified GPA requirement and complete my degree objective within the maximum timeframe permitted.

I understand that withdrawal from all classes following payment of financial aid may require repayment of funds already received based upon U.S. Dept. of Education Return to Title IV (R2T4) requirements. R2T4 calculations determine the amount of financial aid earned as of the withdrawal date. I further understand that this may lead to a bill due to the Student Accounts Office.

I understand that financial aid awards may be cancelled, changed, or modified if the aid offered was based on error in determining eligibility for the amount of financial aid awarded, regardless if the error was made by the student or MiraCosta College.

I understand that if awarded a Federal Pell Grant, federal regulations limit the amount a student may receive in Pell grant funds to the equivalent of six years of full-time attendance. I further understand that I must plan carefully and accordingly if my goal is to transfer to a Bachelor's degree granting institution.

I understand that financial aid can only be received at one school during a single period of enrollment.

I understand that I must re-apply through FAFSA and re-establish eligibility for financial aid each academic year.

I understand that the MiraCosta College Financial Aid Office will send notifications via electronic means. I agree to maintain current email and address information on my SURF account and to regularly log in and check my SURF account for updates.

PLEASE SIGN AND DATE BELOW

Please keep a copy of this agreement for your records.

Student Signature: _____

Date: _____