

College of Marin – Office of Enrollment Services 835 College Ave. Kentfield CA. 94904 Phone: (415) 457-8811 · Fax: (415) 460-0773 www.marin.edu · financial.aid@marin.edu

2023-2024 Request to Cancel/Decline/Return Financial Aid Funds

Last Name	First Name		M.I.	Student ID#		
Federal PELL Grant Lifetime Eligibility Used (LEU)						
The amount of Federal PELL Grant for six years of PELL Grant funding. Since each student is allowed 600% of PEL the academic year in order to present within the award year.	ce the maximum amount of PELL L eligibility in their lifetime. Stud	Grant funding a stu dents have the right	dent can r to decline	receive each ye e or return PELL	ear is equal to 100% Grant funds within	
If you have been awarded or disbursed Direct Stafford Subsidized or Unsubsidized loans and wish to cancel, fill out this form and submit to Enrollment Services Office within the award year.						
Please read and initial the appropriate statement below:						
Declining of Pell Grant or Cal Grant (circle one) I am declining my Grant for which I am eligible for with the understanding that these funds may not be available to me once the award year is over. Additionally, there is no guarantee that I may be eligible for Grants in the future because eligibility is determined annually with the submissions of the Free Application for Federal Student Aid (FAFSA) or DREAM Application.						
I am declining my Grant elig ☐ Fall 2023 ☐ Spring 2024 ☐ Summer 2024	gibility for the following semeste	r:				
Returning Pell Grant or Cal Grant or Direct Loans (circle one)						
I am returning my Grant funds for which I am eligible and have already been awarded with the understanding that these funds may not be available to me once the award year is over. Additionally, there is no guarantee that I may be eligible for Grants in the future because eligibility is determined annually with the submission of the Free Application for Federal Student Aid (FAFSA) or DREAM Application.						
☐ Amount to be returned	d:\$					
I am cancelling the Direct Subsidized/Unsubsidized loan(s) for which I am eligible and have already been awarded with the understanding that these funds may not be available to me once the award year is over.						
Amount to be returned	: \$	WARNING: If you purposely give false or misleading				
I hereby certify that all information is and any attachments hereto is true,	•					
A			_			
Student Signature				Date		
		Office Use Only:	Date Rece	eived	Staff Initial	