

2026-2027 Request to Cancel/ Decline/ Return Financial Aid Funds

Student Information			
COM ID# :		Student Email:	
Last Name:		Date of Birth:	
First Name:		Phone Number:	

Federal PELL Grant Lifetime Eligibility Used (LEU)

The amount of Federal PELL Grant funds that a student may receive over their life time is limited by federal law to be equivalent to six years of PELL Grant funding. Since the maximum amount of PELL Grant funding a student can receive each year is equal to 100% each student is allowed 600% of PELL eligibility in their lifetime. Students have the right to decline or return PELL Grant funds within the academic year in order to preserve eligibility for future enrollment periods. Undisbursed PELL Grant funds may be declined within the award year.

Please read and initial the appropriate statement below:

Declination of funds
_____ I am declining my aid 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>I am DECLINING my aid for the following semester (check one) :</i>
<input type="checkbox"/> Fall 2026 <input type="checkbox"/> Spring 2027 <input type="checkbox"/> Summer 2027 <input type="checkbox"/> Entire 2026-2027

Return of funds
_____ I am returning my aid 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.
<i>I am RETURNING my aid for the following fund (check all applicable) and sign below:</i>
<input type="checkbox"/> Pell <input type="checkbox"/> Cal Grant <input type="checkbox"/> Direct Loan
Amount to be returned: \$ _____

Student Signature _____

Date _____

Office Use Only:	
Date Received:	Staff Initial: