

**Financial Aid**

303 University Avenue, Newark, NJ 07102-1798

p: 973-877-3200

Room 3220 | www.essex.edu/fa**AUTHORIZATION TO DECLINE FEDERAL PELL GRANT FUNDS**

NOTE: If you are utilizing an Unemployment Waiver, you cannot opt-out or decline Federal Pell Grant funds.

I, acknowledge receiving notification of my eligibility for the Federal Pell Grant Program from the Office of Financial Aid at Essex County College. However, I am voluntarily electing to “decline” my Federal Pell Grant funds for the semester/term indicated below. Further, by declining or not using the funds for the semester/term indicated, I hereby waive by eligibility to have the funds awarded charged to my tuition, fees and books (if applicable) for the period indicated.

By signing this form, I acknowledge and agree I will be responsible for any outstanding charges on my account for the semester/term. I understand that ECC cannot guarantee the availability for these funds later during the applicable Academic Year, if there are any changes to federal regulations for receiving the Pell Grant funds. Additionally, I will not be able to withdraw my agreement once this authorization has been received by the Office of Financial Aid at Essex County College.

Authorization:

I certify that I understand the conditions and terms of declining my Pell Grant and I am declining the Pell Grant funds for the semester/term(s) indicated below (student must fill in correct year):

- ☐ Summer 2, 20_____
- ☐ Fall, 20_____
- ☐ Spring, 20_____
- ☐ Summer I, 20_____

Student Name	Student ECC ID Number
Student Signature (Full, No Initials)	Date