



Return this form to:
Student Aid Office
Enrollment Center, Katahdin Hall
354 Hogan Road
Bangor, ME 04401 OR
FAX: 207-974-4683

2011-2012 DATA CONFIRMATION-CERTIFICATION FORM

Incomplete forms will result in a delay in processing.

PLEASE PRINT:

SOCIAL SECURITY #	LAST NAME	FIRST NAME	MI
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<p>How much do you expect to receive from any of the following sources for 2011-2012? If none, leave blank.</p> <p>\$ _____ High School or Private Scholarships (already awarded)</p> <p>\$ _____ Reimbursement from Employer</p> <p>\$ _____ Federal, State, County Retraining Funds (i.e.: TDC, TRA, CED, ACAP Voc Rehab.)</p> <p>Are you eligible for any assistance from these programs? Veteran Benefits (check applicable Chapter)</p> <p>____ Chapter 35 (Survivor/Dependent)</p> <p>____ Chapter 33 (Post 9/11) EMCC cannot provide billing credit for tuition and fees unless the Veteran has provided their <i>Certificate of Eligibility</i> issued by the Veteran Administration.</p> <p>____ Chapter 30 (Montgomery GI)</p> <p>____ Chapter 31 (Voc. Rehab)</p> <p>____ Chapter 1606, 1607 (National Guard Benefits and REAP)</p>	<p>Are you eligible for any assistance from these programs?</p> <p>Room/Board Waivers: (check if applicable)</p> <p>____ EMCC Resident Assistant (RA)</p> <p>Tuition Waivers: (check if applicable)</p> <p>____ EMCC Maine Native American Indian Tuition Waiver <u>Application required!</u> To apply contact EMCC at 207-974-4625 or Go to: www.emcc.edu; select Forms and Document; select Financial Aid</p> <p>____ State of Maine Foster Care Tuition Waiver <u>Application Required!</u> To apply contact FAME, 207- 623-3263 or www.famemaine.com</p> <p>____ State Of Maine Veteran Dependent/Survivor Benefits <u>Application Required!</u> To apply contact: State of Maine Veteran Services 207-626-4464 (EMCC cannot waive student tuition and fees unless student has provided <i>Certificate of Eligibility</i> issued by Maine Veteran Services</p>
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Previously attended college? ____ Yes ____ No If yes, list date attended and name of college _____

Do you or your family have unusual family circumstances that should be taken into consideration in determining your financial need? (Examples). Change in student's, or parent's marital status; Student or parent loss of employment or other benefits in 2011

Provide information below. Print Legibly



Check (✓) after you read each statement:

STUDENT RESPONSIBILITIES:

- I acknowledge that the financial aid I receive cannot exceed my financial need as calculated by the Student Aid Office (SAO), and that I must repay any excess funds.
- I understand that I cannot receive financial aid awards from EMCC and another school for the same period of enrollment, even if I am enrolled at both schools. (Exception: Federal Direct Loan)
- I understand that my financial aid award is based on MyEMCC enrollment information, **I am responsible to notify the Student Aid Office (SAO)** of academic changes that may affect my eligibility, for example: course add/drops, change in number of credit hours attempted, grades of incomplete, withdrawal from courses or change of major.
- I agree to inform the SAO of any changes in my financial resources that may occur throughout the academic year, (for example: receipt of private scholarships, Veteran's benefits, Vocational Rehabilitation, or other employer or agency sponsorships.
- I understand my failure to report financial aid funds received from outside sources may result in reduction or cancellation of my financial aid awards, and/or repayment of financial aid already received.
- I authorize the SAO to discuss my financial circumstances and awards with other public or recognized private agencies that may be considering or have offered me financial aid. **I AGREE TO PERMIT THE STUDENT AID OFFICE AND STUDENT DATA OFFICE TO PROVIDE AN ACADEMIC TRANSCRIPT TO THE SPONSORING AGENCY, PRIVATE SCHOLARSHIP SOURCE.**
- I understand that I must notify SAO in writing or email if I intend to enroll in summer classes.
- I understand that I cannot receive financial aid for more than the equivalent of three (3) years enrolled full-time as a student in a (2) Year academic program or 1 and ½ years enrolled full time for a 1-Year program and that **THIS PERIOD OF ELIGIBILITY IS NOT EXTENDED IF I CHANGE PROGRAMS OR WITHDRAW AND ARE SUBSEQUENTLY RE-ADMITTED TO EMCC.**
- I have read the SAO Satisfactory Academic Progress (SAP) Policy for financial aid recipients **below** as well as the Refunds and Repayment Policy posted at www.emcc.edu and understand I must maintain SAP to continue receiving financial aid funds.

TWO YEAR PROGRAMS		ONE YEAR PROGRAMS	
Minimum Grade Point Average	Credits Carried	Minimum Grade Point Average	Credits Carried
1.50	0-23 credit hours	1.50	0-12 credit hours
1.75	24-35 credit hours	2.00	13 and above
1.90	36-47 credit hours		
2.00	48 credit hours		

- I understand if I receive funds for which I am not eligible due to my error OR EMCC's error, **I must repay those funds immediately.**

My signature confirms that all information submitted to the Student Aid Office for the purpose of determining my eligibility for financial aid is true and is correct to the best of my knowledge.



Student Name (Print Legibly)	EMCC STUDENT ID# (if known)	Student Signature	Date
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