



## 2017-18 Aid Agreement / Title IV Authorization

**Federal regulations for Title IV federal aid (Federal Pell Grant and Federal SEOG) allow SMCC to deduct current term tuition, fees, and room/board from your financial aid award. We must have authorization to pay other institutional charges from your financial aid award.**

Please initial **one**:

I authorize SMCC to have my financial aid applied to institutional charges including but not limited to books, supplies, fees, charges, penalties, fines and miscellaneous cost. I further authorize up to \$200.00 to be paid on any prior year outstanding charges. I understand that I have the right to rescind this choice at any time by giving a written notice to the Financial Aid Office.

I do not authorize SMCC to have my financial aid applied to other institutional charges. I understand that by making this choice, I will be required to pay these charges up front and that this could affect my ability to complete registration.

**Please read and initial each statement below regarding your acceptance of Title IV student aid.**

I am aware that in order to continue receiving assistance, I must maintain **Satisfactory Academic Progress** in the course of study I am pursuing according to the standards of Southwest MS Community College SAP Policy required by the Federal Department of Education.

**\*For a copy of this policy please go to <http://www.smcc.edu/index.php/financial-aid>**

### **ABILITY TO BENEFIT**

I certify that I have a high school Diploma or its equivalent.

### **ANTI-DRUG ABUSE ACT CERTIFICATION**

I certify that as a condition of my Pell Grant, I will not engage in the unlawful manufacture, distribution, dispensation, possession or use of a controlled Substance during the period covered by my Pell Grant; and if I am convicted of a drug related offense committed during that period, within ten (10) days after the conviction, I will report it in writing together with my full name and social security number to: Director, Grants and Contracts Service, U.S. Department of Education, Washington, D.C. 20202-4751.

### **WITHDRAWAL NOTIFICATION**

I UNDERSTAND THAT I MAY BE REQUIRED TO REPAY A PORTION OF THE TITLE IV FUNDS I have received according to the RETURN OF TITLE IV policy set forth in the Student Handbook should I withdraw or if I am administratively withdrawn from school.

**STATEMENT OF REGISTRATION STATUS**

I certify that I am registered with Selective Service.

**or**

I certify that I am not required to be registered with Selective Service:

Please check **one**:

I am female

I am in the armed services on active duty. (Note: Does not apply to members of the reserves and National Guard who are not on active duty.)

I have not reached my 18<sup>th</sup> birthday.

I was born before 1960.

I am a citizen of the Republic of Palau, the Republic of the Marshall Islands, or the Federates State of Micronesia

I am a noncitizen who first entered the U.S. after turning 26 years of age.

I am a noncitizen who entered the U.S as lawful nonimmigrants on a valid visa and remained in the U.S. on the terms of that visa until after the age of 26.

I am a transgender male who was assigned the sex of female at birth.

Print Student Name \_\_\_\_\_ ID# \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_