

Notice to Financial Aid Students Withdrawing from Classes

If you are receiving any type of financial aid funds and are withdrawing from a class, bring this completed form to the Financial Aid office at any campus location or email the completed form to lezell1@jeffersonstate.edu. It is imperative that you speak with a financial aid representative before you submit the course withdrawal form to Admissions. Withdrawing from a course can affect your financial aid eligibility.

| Name | e: | | | | Student ID | (A numb | er): | | | _ | |
|--------------------|-----------------------------------|--|---|--|--|--|--|--|------------------------|------------------------------------|--|
| Street | t Addr | ·ess: | | | | | | | | _ | |
| City: _ | | | State: | Zip Code: _ | Phone | Number: _. | | | | _ | |
| | List | t the classes | you are with | drawing fr | om: | | | | 1 | | |
| | Cou | irse Name: | | | Credi | t Hours: | | | | | |
| | Cou | ırse Name: | | | Credit | t Hours: | | | | | |
| | Cou | irse Name: | | Credit | | | ours: | | | | |
| | Course Name: | | | | Credi | Credit Hours: | | | | | |
| | If yo | ou are withdra | wing complete | ely, do you pl | an to return to JSC | C ? | ☐ Yes | □ No |] | | |
| If you the fo | | | e of financial ai | d and you are | considering withdra | wing fron | n a cours | e, you n | eed to co | nsider | |
| | 0 0 | If you are compuse the withdra aid funds must Withdrawing wafinancial aid rulf you will be enaffected. | letely withdraw wal date from y be repaid. Ill affect your acepresentative to rolled in less th | ring from all co your official co cademic progre o determine if an 6 credit ho | , withdrawing may afourses, you may owe aurse withdrawal formess, which could impayour eligibility will be urs after the withdrawnrolled in less than 6 withdrawnrolled in less than 8 withdrawnrolled in less than 8 withdrawnrolled in less than 8 wit | a repaymon to determent of the determinant of the | ent. The mine hov ligibility for student lo | Financia v much, i or financ oan eligil | I Aid officif any, fin | ce will ancial Consult be | |
| | O | no longer be eli | | | | Jiedit Hot | ars arcer t | ile with | irawai, y | ou wiii | |
| Student Signature: | | | | | | Date: | | | | | |
| • If co | ubmit you r omple i have | ting this form w eceived a loan a ete exit counseling any questions a | ill not withdrav nd will be enro ng. bout how with | y you from a c lled in less tha drawing will a | form to Admissions ourse. on 6 credit hours afte ffect your financial a | r the with | ndrawal, | you will | be requii | red to | |
| | | Use Only: Received By: | | (Initial) | Form Processe | d By: | | (I | nitial) | | |

Jefferson State does not discriminate on the basis of race, color, national origin, sex, disability, or age in its admission, programs and services in compliance with Title VI and VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Title IX of the Education Amendments of 1972 and the Americans with Disabilities Act of 1990.



Direct Loan Borrower Rights and Responsibilities

Complete this form if you received a loan and will be enrolled in less than 6 credit hours after the withdrawal.

| Name: | Student ID (A number): |
|---|---|
| I have the rig | ght to: |
| a copy a grac notific a discless, t deferr prepa document | In information on my loan obligations and information on my rights and responsibilities as a borrower; y of my MPN either before or at the time my loan is disbursed; e period and an explanation of what this means; cation, if the Department transfers your loan to another servicer without your consent; losure statement received before I begin to repay my loan, that includes information about interest rate the balance I owe, and a loan repayment schedule; ment or forbearance of repayment for certain defined periods, if I qualify and if I request it; y my loan in whole or in part anytime without an early-repayment penalty; and nentation when my loan is paid in full. |
| I am respons | |
| repaying dissat notify making and notify | leting exit counseling before I leave school or drop below half-time enrollment; ing my loan according to my repayment schedule even if I do not complete my academic program, I am isfied with the education I received, or I am unable to find employment after I graduate; ing my lender or loan servicer if I move or change my address, change my telephone number, change my telephone number, change my name, change my Social Security number, or change employers or my employer's address or telephone number changes; graduates on my loan after my grace period ends, unless I have a deferment or forbearance; ing my lender or loan servicer of anything that might alter my eligibility for an existing deferment or |
| | d a loan and will be enrolled in less than 6 credit hours after the withdrawal, you will be required to counseling. |
| Student Sign | ature: Date: |

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