



SAN DIEGO MESA COLLEGE

7250 Mesa College Drive
San Diego, California 92111-4998

Financial Aid Office Hours
FALL & SPRING SEMESTERS
M - TH 8:00 - 6:00
F 8:00 - 12:00
SUMMER SESSIONS
M - TH 7:30 - 6:00
F CLOSED

Office of Financial Aid

619-388-2817

FAX 619-388-2824

TERMS OF AGREEMENT

INITIAL Please initial the following statements. If there is any part that you do not understand, please ask for clarification.

- _____ 1. I understand that if, during the academic year, I receive financial aid at any other institution I must notify the Financial Aid Office at Mesa College. Failure to do so may result in an overpayment, which will have to be repaid. I understand that if repayment is required for any reason, I will be ineligible to receive additional aid until full repayment is made. A hold will be placed on my records until I repay the amount owed.
- _____ 2. I understand that if I withdraw from or drop **ALL** of my classes, or I do not attend a late start class for which I have been paid, I may need to repay a portion of any Federal Title IV aid that I receive.
- _____ 3. I understand that, with the exception of the Board of Governors Enrollment Fee Waiver, in order to be eligible to receive funds listed on any award letter, I must be enrolled in at least one class at San Diego Mesa College.
- _____ 4. I understand that, if eligible, my Pell payment will be based on my enrollment level at the time of the **Enrollment Status Date**, which is indicated on the payment dates schedule. I also understand that, after that date, my Pell payment will **not** be adjusted due to enrollment changes.
- _____ 5. I UNDERSTAND THAT MY FINANCIAL AID AWARD IS CONTINGENT UPON MY MEETING AND MAINTAINING SATISFACTORY ACADEMIC PROGRESS. I understand that a copy of the *Policy for Standards of Satisfactory Academic Progress for Financial Aid Recipients* has been made available on-line at www.sdmesa.net. I agree that I will read these standards. I understand that there is an appeal process, which I may follow to have my Financial Aid status reconsidered.
- _____ 6. I understand that Student Education Plans are highly recommended, but are not required by the Financial Aid Office unless I am in an appeal situation, or if I request a sophomore level student loan amount. I also understand that my future eligibility for financial aid may be jeopardized if I do not take classes that are required to complete my current degree objective.
- _____ 7. If I am awarded a Pell Grant, I authorize San Diego Mesa College to establish a bookstore account in my name using my estimated Pell Grant eligibility (excluding Non-Resident students). If I choose to use this account, any funds remaining (that I am eligible to receive) will be mailed to my current address after the bookstore period has ended. I also understand that, if eligible, I may purchase a bus pass using my Pell Grant award. These benefits are not available if the Pell Grant award is made on or after the end of the semester add/drop period.
- _____ 8. I understand that my signature/PIN on the FAFSA authorized the release of any records pertaining to my State and Federal aid to any educational institution, guarantee agency, or State and/or Federal entity, for the purpose of maintaining compliance with State and Federal regulations.
- _____ 9. I understand that the most current academic transcripts from all prior institutions attended must be on file with the San Diego Community College District.
- _____ 10. I understand that I will not be eligible for aid if I owe a repayment or overpayment on **ANY** Aid [including Student Loans] to another educational institution. I also understand that I will not be eligible for any Federal Aid if I am in "Default" on any student loan [Stafford, Direct, PLUS, SLS, or Perkins] from any institution.
- _____ 11. If I am or become a non-resident, I authorize San Diego Mesa College to credit my student account with any Pell Grant and Supplemental Educational Opportunity Grant funds for which I qualify to cover applicable tuition and enrollment fees. I also understand that I must pay the balance of tuition and fees within the required timeframe or I will be dropped for non-payment.

If you wish to receive E-mail correspondence from San Diego Mesa College, you may submit your

e-mail address: (Please Print Neatly) _____. If you chose not to receive notification via e-mail, please contact the Financial Aid Office to remove your E-mail Address.

I have read, initialed and fully understand the provisions stated above. I hereby certify that I will maintain full compliance with the terms listed above in this document.

Name (PLEASE PRINT)

CSID #

Signature

Date