

NAME.

Written Confirmation of Future Attendance

SCCC ID#

STUDENT SIG	NATURE DATE	
		misleading information on this worksheet, you may be fined, be sentenced to jail, or both.
I certify that all of the information reported on this worksheet is complete and correct.		WARNING: If you purposely give false or
Certification	and Signatures:	
	Adjustment of aid may result in a balance being owed to	TO SCCC.
Initial Here	I must be enrolled and maintain at least 6 credit hours to receive Federal Direct Loans.	
	I understand that my financial aid will adjust to current	•
	Government.	oney to seed and/or the rederal
	course(s) that I am currently enrolled in. If I do not attended and I may owe me	, , ,
	scheduled for in this summer term. I am now reaffirming my intention to attend my	
Initial Here	time, I am required to reaffirm my intention to attend the remaining course(s) I am	
	I understand that in order for a Return of Title IV calcul	ation to not be completed at this
more of my	courses at Sussex County Community College.	
	g a course, being dropped for non-attendance, withdrawing	g or receiving an "FN" from one or
	ent of Federal financial aid. These regulations have impact	,
I understan	d that the U.S. Department of Education updated regulation	ons governing the awarding and
IAVIAIT		JCCC 1Dπ

Return the completed form to SCCC – Financial Aid Office, One College Hill Road, Newton, NJ 07860.

This form may also be faxed to 973-300-2224.

Do not mail this worksheet to the U.S. Department of Education or NJ Higher Education Student Assistance Authority (NJHESAA).

Submit this worksheet to the Financial Aid Office at Sussex County Community College.

You should make a copy of this worksheet for your records.