



I agree to allow Atlantic Cape Community College to apply any Title IV credit balance financial aid/student loan funds towards the tuition and fees for Non eligible Title IV courses and books/supplies for the semester listed below, as well as any prior semester balance.

I understand that if my financial aid awards are adjusted, I may have to pay the balance out of pocket.

Name (Please print) _____

Signature _____

Semester _____

CWID number _____

Date _____

Office of the Bursar Cashier signature _____