

RETURN TO FINANCIAL AID OFFICE:



(FAMA71) (FCMA71) (FFMA71) (FSMA71)

2026-2027
DECLINE OF AID/
INTRA-DISTRICT COLLEGE CHANGE

STUDENT INFORMATION

Last Name First Name M.I. Student ID#

DECLINE OF AID

I am requesting to DECLINE Financial Aid for the following college (check one college only) and semester(s):

- ARC CRC FLC SCC
Fall 2026 Spring 2027 Summer 2027

NOTE: I understand if I received financial aid at this college for the semester(s) I selected above, I must repay all financial aid funds received during that semester back to the college before this form can be processed. Student Initials

Reason for request:

INTRA-DISTRICT COLLEGE CHANGE

I am requesting to OPEN Financial Aid file with the following college (check one college only) and semester(s):

- ARC CRC FLC SCC
Fall 2026 Spring 2027 Summer 2027

I have listed the school code for the college selected above on my FAFSA/DREAM ACT application Student Initials Staff Verified

NOTE: I understand if I am a Cal Grant recipient, I also need to update my WebGrants 4 Students account (https://mygrantinfo.csac.ca.gov) to submit a school change or report a leave of absence. Failing to take action may result in Cal Grant not being paid in current eligible terms nor renewed for future academic years. Student Initials

CERTIFICATION AND SIGNATURE

I authorize the changes requested above to be made to my financial aid file. If any of the information that I initialed above is missing/incomplete, the processing of my request may be delayed.

Student Signature: Date: