



LETTER OF NON-ELIGIBILITY

Date: \_\_\_\_\_

I, \_\_\_\_\_, ID No. \_\_\_\_\_
Student Name CF ID No.

authorize the College of Central Florida to release my financial aid information/status to:

Agency or Company Name

I request this information be: [ ] mailed [ ] faxed [ ] emailed

Agency/company contact information is:

Name

Address

Telephone No.

Fax No.

Email

To be completed by the Financial Aid Office

The student is not receiving financial aid due to the following reason:

- [ ] Has not completed a FAFSA for the current academic year
[ ] Has exceeded the maximum eligibility allowed for the Federal Pell Grant
[ ] Is not meeting the minimum Standards of Academic Progress to receive federal aid and [ ] has not appealed or [ ] has appealed and the appeal was denied
[ ] Student has completed the FAFSA but has not completed the application process (provided necessary forms needed to determine eligibility)
[ ] Student has completed the application process but is not eligible for grants due to their EFC (is eligible for loans only)

If you need additional information, please do not hesitate to contact our office at 352-854-2322, ext. 1476 or the person who completed the form at the e-mail address below.

Completed by: \_\_\_\_\_ Title \_\_\_\_\_
Name

Signature

Email