



LIFETIME PELL GRANT ELIGIBILITY ACKNOWLEDGEMENT 2023-2024

NAME: _____ **SS#:** _____ **EMPLID:** _____

Effective July 1, 2012, students are limited to 600% (or the equivalent of 12 full-time semesters) of Pell Grant eligibility in a lifetime. The eligibility calculation includes all Pell Grants you have received at any college or university.

You may view your Pell Grant history at <http://www.studentaid.gov/>

Please check one or more of the following if you wish to decline the PELL Grant coverage:

- I do not want to receive a Pell Grant payment at City Tech for the 2023-2024 academic year.
- I do not want to receive a Pell Grant payment at City Tech for the Summer 2023 semester.
- I do not want to receive a Pell Grant payment at City Tech for the Fall 2023 semester.
- I do not want to receive a Pell Grant payment at City Tech for the Spring 2024 semester.
- I do not want to receive a Pell Grant payment at City Tech for the Summer 2024 semester.

By signing this form, I understand that I will not receive a Pell Grant payment towards coverage of my tuition and fees charges for the period selected. I understand that I will be responsible for payment of any outstanding balance owed to the institution. I authorize City Tech’s Financial Aid Office to perform the above request.

It is the policy of City Tech to recruit, employ, retain, promote, and provide benefits to employees and to admit and provide services for students without regard to race, color, national or ethnic origin, religion, age, sex, sexual orientation, gender identity, marital status, disability, genetic predisposition or carrier status, alienage, citizenship, military or veteran status, unemployment status or status as a victim of domestic violence.

Student Signature

Date

EXAMPLE LIFETIME PELL ELIGIBILITY CALCULATION

AWARD YEAR	ENROLLMENT		SEMESTERS USED	% USED	LIFETIME PELL USED
2020-2021	FALL	FULL-TIME	1	50%	50%
	SPRING	FULL-TIME	1	50%	100%
2022-2023	FALL	FULL-TIME	1	50%	150%
	SPRING	FULL-TIME	1	50%	200%
	SUMMER	FULL-TIME	0.5	25%	225%
2023-2024	FALL	FULL-TIME	1	50%	275%
	SPRING	FULL-TIME	1	50%	325%
Totals			6.5		325%

FOR OFFICE USE ONLY

FA Representative: _____

Date: _____

Financial Aid Signature