



Office of Financial Aid
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Kingsborough Community College
Of The City University of New York
2001 Oriental Boulevard
Brooklyn, New York 11235

FINANCIAL AID AWARD DECLINATION FORM

You must sign this form and return it to the Financial Aid Office **ONLY** if you wish to decline the award offered on your award letter, otherwise your awards will be accepted automatically. **It is your responsibility to notify the Financial Aid Office of any additional changes in writing.**

I am declining award even though I am entitled to it

Type of Award	Amount	Term	Initials

By signing this form, you are acknowledging that you understand the terms and conditions on your award letter and any additional conditions that may apply to your Financial Aid Awards based on federal regulation while attending Kingsborough Community College.

Student Name _____
(print):

SSN: _____

Student
Signature: _____

Date: _____