



**Yuba Community College District  
Financial Aid Offices**

**Yuba College**  
2088 North Beale Road  
Marysville, CA 95901  
530-749-7999

**Woodland Community College**  
2300 East Gibson Road  
Woodland, CA 95776  
530-661-5725

**Lake County Campus**  
15880 Dam Road Extension  
Clearlake, CA 95422  
707-995-7923

**Decline Financial Aid Awards for 2019-2020**

\_\_\_\_\_  
Last Name First

\_\_\_\_\_  
Student ID

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Phone Number (Include area code)

\_\_\_\_\_  
City State Zip Code

**STUDENT: Complete this section.**

**1. I am requesting to decline financial aid for the following semester(s):**

☐ Fall 2019 ☐ Spring 2020 ☐ Summer 2020

**2. I am declining the following grants/awards:**

☐ Pell Grant ☐ Federal Work-Study ☐ FSEOG ☐ CAL Grant ☐ EOPS ☐ CARE

☐ Scholarship(s) ☐ Other: \_\_\_\_\_

**3. I am requesting to cancel my financial aid award(s) for the following reason(s):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Note: If you have already received financial aid funds for a term selected above, you must repay all financial aid funds before this request can be processed.**

**Certification: I have read and understand the information stated on this form. I certify that the information provided on this form is true and correct to the best of my knowledge. I understand that this information will be used to determine my eligibility and that false or misleading information may be cause for denial, termination, and/or repayment of financial aid funds.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**FINANCIAL AID OFFICE USE ONLY**

Awarded(s) Adjusted/Amended: ☐ Pell ☐ FWS ☐ FSEOG ☐ CAL Grant ☐ EOPS ☐ CARE

☐ Scholarship(s) ☐ Other: \_\_\_\_\_

Term: ☐ Fall 2019 ☐ Spring 2020 ☐ Summer 2020

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Financial Aid Signature Date