



# OVERLAPPING AID CLEARANCE LETTER

Student Name (print): \_\_\_\_\_

SSN: XXX-XX \_\_\_\_\_

In order to accurately determine your federal student aid eligibility with Kilgore College, we are required to review your financial aid history with the National Student Loan Data System (NSLDS). It appears you have active Pell Grant and/or federal student loans within the same academic year at another institution and Kilgore College. The following information must be obtained from your previous school.

If you have already received aid for the current term and your financial aid is in excess of eligibility and/or your loans are in excess of annual borrowing limits and/or federal aggregate borrowing limits, it may be necessary for our office to reduce already disbursed aid and you will be responsible for amounts owed to Kilgore College. If you have not received aid for the current term at KC, the information provided on this letter will allow our office to accurately package your financial aid, provided you have applied for financial aid.

**By signing this form, you give authorization for your previous school to look up and release your financial aid information.** Note: Your previous school may require additional information or time in order to complete this request.

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

\_\_\_\_\_  
*Date*

### School Certification

The following information must be completed by a financial aid administrator at your previous school. It is your responsibility to submit this form or request that the previous school submit this form to KC.

Award Year: \_\_\_\_\_

Award Name	Award Amount	Disbursed Amount	Canceled Amount
Pell Grant			
Subsidized Loan			
Unsubsidized Loan			

Pell Grant Period Begin Date: \_\_\_\_\_

Pell Grant Period End Date: \_\_\_\_\_

Student Loan Period Begin Date: \_\_\_\_\_

Student Loan Period End Date: \_\_\_\_\_

Future disbursements canceled:  Yes  No

*Note: Future disbursements at the previous institution must be canceled in order for KC to release aid to your account.*

### School Certifying Official

Name (print): \_\_\_\_\_ Title: \_\_\_\_\_

Institution Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_  
*Staff Signature*

\_\_\_\_\_  
*Date*