



I hereby state my intention to enroll at The College of New Jersey in The Educational Opportunity Fund (EOF) Program and accept the EOF Promise Award. By **initialing** each statement below and submitting my \$65.00 enrollment deposit by May 1st, 2016, I am acknowledging that I have read the information on the green "**Important EOF Information**" sheet and I am agreeing to the conditions outlined below:

EOF Financial Eligibility-FAFSA and HESAA Submission:

___ I have completed and submitted the 2016-2017 Free Application for Federal Student Aid (FAFSA) with TCNJ listed as a first choice recipient of the information by May 1st, 2016.
(Please refer to #1 on green "**Important EOF Information**" insert.)

___ I must have completed and submitted the New Jersey Higher Education Student Assistance Authority (NJ HESAA) NJ State Grant Questions by May 1st, 2016.
(Please refer to #2 on green "**Important EOF Information**" insert.)

___ If my financial aid file is selected for Federal and/or State Verification by TCNJ and/or NJ HESAA, I understand that I must submit the requested documentation in a timely manner to assure my file is completed prior to the summer enrichment program.

EOF Eligibility and EOF Financial Award Maintenance:

___ I understand that my acceptance to The College of New Jersey and receipt of the TCNJ EOF Promise Award is under the auspices of the Educational Opportunity Fund Program.

___ I understand that the TCNJ EOF Program is a four year commitment which qualifies me for academic and financial support throughout my tenure at the College beginning summer 2016.

___ I understand that the TCNJ EOF Promise Award provides funding for the full Promise direct cost of attendance for the Fall and Spring semesters of the first two years of my studies at TCNJ, which includes: tuition, approved fees, housing, meals and textbooks. Health insurance will be covered, if not otherwise covered by a guardian or government sponsored health program (i.e., NJFamilyCare). This award does not cover ineligible costs, which includes: late fees, parking tickets, library fines or costs associated with damages to facilities.

___ I understand that EOF financial support may continue in my 3rd and 4th years through the TCNJ EOF Incentive Award. These varying awards are based on eligibility guidelines, academic performance, and unit progression.
(Please refer to #3 on green "**Important EOF Information**" insert.)

___ I understand that to receive TCNJ EOF financial support I must be eligible to receive the State of New Jersey Tuition Aid Grant (TAG) and must adhere to all guidelines outlined and enforced by the HESAA.
(Please refer to #4 on green "**Important EOF Information**" insert.)

___ I understand that continued EOF financial support throughout my four years of studies at TCNJ is contingent upon meeting the annual EOF income eligibility guidelines, as established by the State of New Jersey Office of the Secretary of Higher Education. If I become ineligible at any time during my enrollment at TCNJ, I understand that it will be my sole responsibility to obtain other funding sources to fund my cost of attendance.



EOF Summer Program Expectations:

___ I understand that, as a condition of my acceptance, I am required to participate in the 2016 EOF five-week summer enrichment program, which will run July 9th through August 10th, 2016.

___ I understand that my Fall matriculation at The College of New Jersey is contingent upon successful completion of the five-week summer program as evaluated by the EOF Director and the EOF summer review committee.

Student Name: _____

PAWS ID: _____

Student Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____