



Return to: **School Services Department**
 1755 Lake Cook Road
 Deerfield IL 60015-5209
 866.247.2172
 isac.schoolservices@illinois.gov

Certification of Enrollment for Payment

Grant Programs for Dependents of Police, Fire or Correctional Officers 2020-21 Academic Year

School Name School Code

Term: Requested Due Date

Applicant's Name	*Academic Level	Application Date	Max Term Amt. Awarded	Requested Amount	Total Hours Enrolled

I certify that each student for whom payment is requested meets all the following:

- Enrolled on at least a half-time basis;
- Making satisfactory academic progress for the term in which payment is being claimed;
- Not in default on any student loan, nor owe a refund on any state or federal grant;
- Amount does not exceed the tuition and mandatory fees charged for this term; and
- Compliance with Selective Service requirements.

If not eligible, list reason: _____

Signature & Title of Certifying Official Date

Telephone Number E-mail Address

* Key – Academic Level:
 1 = Freshman
 2 = Sophomore
 3 = Junior
 4 = Senior
 5 = Graduate