



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

## 2025- 2026 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. **You must notify the Financial Aid Office of any additional changes in writing.**

I am declining these awards even though I am entitled to it

Type of Award	Amount	Term	Initials

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***By signing this form, you are acknowledging that you understand the terms and conditions of 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):*** \_\_\_\_\_

***CUNYfirst ID:*** \_\_\_\_\_

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

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