Certification of Enrollment for Payment

Grant Programs for Dependents of Police, Fire or Correctional Officers
2024 – 25 Academic Year

Return to:
School Services
1755 Lake Cook Road
Deerfield IL 60015-5209
866.247.2172
ISAC.SchoolServices@Illinois.gov

SOME SCHOOL
SOME STREET

SOME TOWN, IL, 60000
FEIN: 123456789

000 — School Code
999999 — Federal Code

FALL — Term: Requested
11/29/2024 — Due Date

Applicant's Name	*Academic Level	Maximum Term Award Amount	Requested Amount	Total Hours Enrolled	*Enrollment Status	Eligibility Units Used Through
SOME STUDENT		$11,418.00	$	HOUR		0

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

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

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 =Graduation

Enrollment Status:
1 = Full-Time
2 = At least Half-Time
3 = Less than Half-Time
4 = Not Enrolled

SAMPLE