
Name _____ W
Student I.D. Number _____

Address (Street, City, State Zip) _____ Phone Number _____

Cancellation / Reinstatement of Aid

(Please note that you must contact Student Accounts to cancel loans that have already been disbursed.)

All Financial Aid - Please (circle one) *cancel / reinstate* my aid application for the following quarters:
Reinstatement is based on the availability of funds.

Fall Winter Spring

Subsidized Direct Loan - Please (circle one) *cancel / reinstate* my loan for the following quarters:

Fall \$ _____ Winter \$ _____ Spring \$ _____

Unsubsidized Direct Loan - Please (circle one) *cancel / reinstate* my loan for the following quarters:

Fall \$ _____ Winter \$ _____ Spring \$ _____

Federal Perkins Loan - Please (circle one) *cancel / reinstate* my loan for the following quarters:

Reinstatement is based on the availability of funds.

Fall \$ _____ Winter \$ _____ Spring \$ _____

Parent Plus Loan - Please (circle one) *cancel / reinstate* my loan for the following quarters:

(Attach a revised Plus Loan Addendum to this form)

Fall \$ _____ Winter \$ _____ Spring \$ _____

Other Action: _____

Revisions can take up to 8 weeks to process and are based on the availability of funds.

I certify that the above information is true and correct.

Student's Signature _____ Date _____

Counselor's _____
Decision _____ Cnslr Initial _____ Date _____