

2017-2018
Request to Cancel Financial Aid

Student Name @ _____
NMHU ID #

Address City State Zip

Phone Number Email Address

This form is to request cancellation of financial for the following semester:

- Fall 20____ Spring 20____ Summer 20____

Check one box:

- Cancel all of my work-study, grants, loans and scholarships.
- Cancel only the following funds (check all that apply)
 - Work Study Fall 20____ Spring 20____ Summer 20____
 - Pell Grant
 - SEOG
 - STATE
 - N.M. College Affordability Grant
 - Perkins Loan
 - Direct Subsidized Stafford Loan
 - Direct Unsubsidized Stafford Loan
 - Other_____

Why are you canceling your aid? (If you are transferring to another New Mexico school and wish to transfer your Lottery Scholarship, please complete a New Mexico Scholarship Transcript Transfer)

I understand the financial aid I indicated will be canceled.

Student Signature (Original Signature Required) Date