

2023- 2024 Request to Cancel Financial Aid

Student Name _____ @ _____
Banner ID #

Phone Number _____ Email Address _____

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

- Fall 2023 Spring 2024 Summer 2024

Check one box:

1. Cancel all of my work-study, grants, loans and scholarships.

2. Cancel only the following funds (check all that apply)

Work Study Fall 2023 Spring 2024 Summer 2024

Pell Grant

SEOG

STATE

N.M. College Affordability Grant

Direct Subsidized Stafford Loan

Direct Unsubsidized Stafford Loan

Other _____

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

I understand the financial aid I indicated will be cancelled.

Student Signature (Original Signature Required) _____ Date _____