



Spokane Community College FINANCIAL AID CANCELLATION REQUEST

Student's Name: (Please Print)

Last Name	First Name	MI	Award Year
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Student's SID:

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Check all the Quarters that apply:

Summer FALL Winter Spring

Select the aid you would like to **CANCEL**:

- ALL AWARDS
- LOANS
 - Subsidized Direct Loan
 - Unsubsidized Direct Loan

Reason for cancellation:

By signing this form:

- I understand that I still must drop any classes that I am registered in for the quarters I do not plan to attend or pay at my own expense.
- I understand that I must reactivate my aid if I plan on attending within the same year and that I may not be eligible for the same amount of funding.
- I understand that I must complete a new FAFSA if I plan on attending the next academic year.

Signature	Date
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FA NOTES
