

## Student Loan Cancellation Request Form

**Please do not complete this form until you have an award offer.  
PLEASE USE BLACK INK WHEN COMPLETING FORM.**

Name \_\_\_\_\_ W# \_\_\_\_\_ phone # \_\_\_\_\_

Deadline for This Request

| Fall Semester | Spring Semester | Summer Semester |
|---------------|-----------------|-----------------|
| December 4th  | April 23rd      | August 13th     |

|                      |                 |               |                  |                 |                 |                 |
|----------------------|-----------------|---------------|------------------|-----------------|-----------------|-----------------|
| I will be attending: | Fall Semester   | O 12+ credits | O 9 - 11 credits | O 6 – 8 credits | O 1 - 5 credits | O Not attending |
|                      | Spring Semester | O 12+ credits | O 9 - 11 credits | O 6 – 8 credits | O 1 - 5 credits | O Not attending |
|                      | Summer Semester | O 12+ credits | O 9 - 11 credits | O 6 – 8 credits | O 1 - 5 credits | O Not attending |

Loan Cancellation:  Subsidized only  Unsubsidized only  both Subsidized and Unsubsidized

Please list the dollar amount you would like canceled:

| Fall | Spring | Summer |
|------|--------|--------|
| \$   | \$     | \$     |

- If you are requesting Weber State University cancel and return your loans within 30 days of receiving the disbursement, DO NOT return your loan funds to your loan servicer. Loans that were applied to your student account will be returned to the Department of Education based on this request.
- The Financial Aid and Scholarship Office will only cancel the amount listed.
- If your loan amount was in excess of your tuition and fees and you received those funds through direct deposit or a check, you must return those funds to Weber State University’s Cashiers Office. You will owe a balance to Weber State University until these funds are returned.

I understand all information about the loan I am applying for. To the best of my knowledge, the information included on this document is true. I understand that misrepresentation of facts in connection with this document whenever discovered may be sufficient cause, in and of itself, for cancellation or repayment of financial aid. I understand that if any changes in my loan period,

|                   |      |
|-------------------|------|
| Student Signature | Date |
|-------------------|------|

|  |                              |                                    |                      |
|--|------------------------------|------------------------------------|----------------------|
| <b>FOR OFFICE USE ONLY: Grade Level:</b> | <b>Dependent/Independent</b> | <b>Aggregate limit—Subsidized:</b> | <b>Unsubsidized:</b> |
| <b>Enrollment: Fall:</b>                 | <b>Spring:</b>               | <b>Summer:</b>                     | <b>Degree:</b>       |