

REQUEST TO CANCEL OR REBUDGET STUDENT LOANS

Please allow two weeks for your request to be processed.

Name _____ SSN _____
Last First M.

I request that my student loan be:

Cancelled

Loan Program and Amount (to nearest \$)	
<input type="checkbox"/> Federal Subsidized Stafford	Amount _____ .00
<input type="checkbox"/> Federal Unsubsidized Stafford	Amount _____ .00
<input type="checkbox"/> Federal Plus	Amount _____ .00
<input type="checkbox"/> Other	Amount _____ .00
Loan Period	
<input type="checkbox"/> Entire Loan Period	
<input type="checkbox"/> Fall only	
<input type="checkbox"/> Spring only	
<input type="checkbox"/> Summer only	
Lender Name	_____
Reason for cancellation	_____ _____

Rebudgeted

My enrollment status has changed.
Please rebudget my loan (circle all that apply)
Fall
from _____ to _____ credits
Spring
from _____ to _____ credits
Summer
from _____ to _____ credits
I understand that a change in credit hours may affect my eligibility for loan money, and that loan proceeds may need to be returned to my lender as a result of this rebudgeting.
**This form is only necessary if you are registered for fewer credit hours than your loan was certified for.

I authorize the George Washington University, Office of Student Financial Assistance, to cancel my student loan(s) and/or return my student loan proceeds to my lender for the period indicated above. If 120 days have passed since my loan proceeds were disbursed to GW, I am responsible for any fees and/or interest charges that may have accrued.

Signature

Date