



## 2025-26 Request to Cancel Financial Aid

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_

Phone # \_\_\_\_\_

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

Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

**Check one:**

- ☐ Cancel all of my financial aid, which may include work study, grants, loans, and scholarships.
  - ☐ I will not be attending ENMU-Roswell for the 2025-26 school year
  
- ☐ Cancel only the following funds (check all that apply)
  - ☐ Parent Plus loan
  - ☐ Direct Subsidized loan
  - ☐ Direct Unsubsidized loan
  - ☐ Work-study
  - ☐ Scholarships (please specify) \_\_\_\_\_

**Please note:** If you decline work-study or student loans for the fall semester, they will be cancelled for both fall and spring semesters.

I understand the financial aid I indicated will be cancelled. This form can be faxed to the financial aid office. (Form must be signed by the student)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date