



## 2026-27 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 2026-27 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