Office of Financial Aid
Division of Enrollment and Access
Centennial Hall
1065 Campus Delivery
Fort Collins, CO 80523-1065
(970) 491-6321 (970) 491-5010
financialaid.colostate.edu



2021-2022 Loan Cancellation Form

Please note: This form must be completed within 14 days of disbursement. Any forms submitted more than 14 days after loan disbursement will be reviewed on a case-by-case basis.

| Studer | nt Name | e: | CSUID: | |
|---|------------------|---|------------------------------------|--|
| | | porrower of a loan and you now want to reduce mail notifying them that their awards have be | | |
| 1) | Indica | Indicate the semester(s) you want to reduce or cancel: | | |
| | | 2021-2022 academic year Fall 2021 Spring 2022 Summer 2022 | | |
| 2) | Indica | Indicate the amount you want to reduce or cancel by the type of loan: | | |
| | Student Loan(s): | | Requested Amount to Cancel/Reduce: | |
| | | | | |
| | | | | |
| | | | | |
| | | s form, I understand that the amount cancelled v nderstand that late fees can incur and prevent fu | | |
| Student Signature | | | Date | |
| Parent Borrower Signature (For Parent PLUS loans only) | | | Date | |