

Request to Cancel My Financial Assistance
at the University of Southern Indiana

NOTE: To withdraw from classes, see the Registrar!

(Please Print)

Student Name: _____

Social Security Number: _____

For which term(s) do you want your aid canceled? (Circle all that apply and enter year)

Fall 200___ Spring 200___ Summer 1, 200___ Summer 2, 200___ Summer 3, 200___

Are you transferring to another university/college? (Circle One) Yes No If yes, where?

University/College Name: _____

“How to Transfer My Aid” instructions are available from our office and on our web page at this link: <http://www.usi.edu/FINAID/transfer.asp>

Checklist of Aid to be Canceled – Note that all financial aid refund checks payable to you the student (or parent borrower) for the above terms must be returned to USI before aid can be canceled!

___ Please cancel ALL financial aid at USI.

___ Stafford Loan (Complete a loan exit interview if you are leaving USI.)

___ Scholarships

___ Other: _____

___ Parent PLUS Loan (Parent borrower must sign below if PLUS Loan is marked.)

Student’s Signature: _____ **Date:** _____

***Parent Borrower’s Signature:** _____ **Date:** _____

* Parent borrower must sign only if PLUS Loan is to be cancelled.

Comments: _____

Mark all aid refund checks “VOID” and attach them to this form. Return this form to:

Student Financial Assistance
University of Southern Indiana
8600 University Blvd.
Evansville, IN 47712

Phone: 812/464-1767 or 800/467-1965 FAX: 812/461-5305 Web: www.usi.edu/finaid/ email: finaid@usi.edu