



Financial Aid Cancellation Form

31-10 THOMSON AVENUE C-107 L.I.C. NY 11101 TEL: 718-482-7218 FAX: 718-609-2020

Complete and return to LaGuardia Community College Student Financial Services

Student Name: _____

Student ID: _____ Student Phone # _____

I am canceling the following academic year _____ financial aid programs at LaGuardia Community College:

- All Financial Aid Programs for the semester(s) checked below.
- Federal Direct Unsubsidized Loan
- Federal Direct Subsidized Loan
- New York State Grants (TAP, APTS, PTAP)
- Federal Work-Study Award
- Federal SEOG Grant
- Federal Pell Grant
- Private Loan

Indicate the semester(s) you want to cancel your financial aid:

Semester(s) _____

Please state the reason you are canceling this financial aid:

Student Signature: _____ **Date:** _____