

STUDENT INFORMATION

PRINT CLEARLY

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Last Name

First Name

M.I.

Student ID Number

If you want to cancel any portion of your financial aid awards, please complete all sections of this form and submit it to the Financial Aid Office.

SECTION 1: FINANCIAL AID AWARDS I WOULD LIKE TO CANCEL

Federal award(s) I wish to cancel:	Semester(s) I am cancelling my federal awards for:
<input type="checkbox"/> Federal Pell Grant* <input type="checkbox"/> Federal Supplemental Educational Opportunity Grant (FSEOG) <input type="checkbox"/> Federal Work Study (FWS)	<input type="checkbox"/> Fall 2026 <input type="checkbox"/> Spring 2027 <input type="checkbox"/> Summer 2027
State award(s) I wish to cancel:	Semester(s) I am cancelling my state awards for:
<input type="checkbox"/> Cal Grant* <input type="checkbox"/> Student Success Completion Grant (SSCG)	<input type="checkbox"/> Fall 2026 <input type="checkbox"/> Spring 2027 <input type="checkbox"/> Summer 2027

INITIAL REQUIRED	I understand that canceling the Federal Pell Grant may also cancel my FSEOG and/or state grants and that canceling the Cal Grant will cancel my SSCG for the semester(s) selected.
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Reason why I am cancelling my award(s):

I want to save my lifetime grant eligibility

I will not be attending MSJC for the 2026-2027 academic year

I am attending another school _____ SCHOOL NAME _____ for the semester(s) selected

SECTION 2: AID I NEED TO RETURN FOR THE AWARDS I AM CANCELLING

Funds already disbursed for the awards and semester(s) indicated above for cancellation must be returned to process your cancellation request.

<input type="checkbox"/> I have not received any funds <input type="checkbox"/> I have received funds and want to return the following amount of \$ _____ via:	<input type="checkbox"/> Self-Service: Notification to pay online will be sent to your preferred and/or student email on file. <input type="checkbox"/> In-Person: Please stop by the Financial Aid Office to have your request processed.
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SECTION 3: CERTIFICATION

I hereby certify and understand that these funds may not be available to me once the award year is over. Additionally, there is no guarantee that I will be eligible for funds in the future, as eligibility is determined annually through the submission of the Free Application for Federal Student Aid (FAFSA) or the CA DREAM Act Application (CADAA).

Signature: _____ WET SIGNATURE REQUIRED	Date: _____
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MSJC FINANCIAL AID OFFICE USE ONLY

Pell Grant: Initial & Date	FSEOG: Initial & Date	FWS: Initial & Date	Cal Grant: Initial & Date	SSCG: Initial & Date
<input type="checkbox"/> Unable to Process: Initial & Date	Comment:			
<input type="checkbox"/> IRQ	<input type="checkbox"/> OnBase	Notification Sent: <input type="checkbox"/> SSRAW <input type="checkbox"/> DRPG	Staff Name:	Date: