



**KLAMATH**  
Community College

Financial Aid Office  
7390 S. 6<sup>th</sup> Street  
Klamath Falls, OR 97603  
(541) 882-3521  
www.klamathcc.edu

# 14 Day Loan Return 2025-2026

(Please Print)

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Student ID Number

As a student attending Klamath Community College and receiving Federal Student Aid funds, you are able to return loan funds within **14 days of the date of disbursement**. Return this form and your check to the Business Office/Cashier located in Building 9.

- ☐ I am returning the entire amount on my refund check.
- ☐ I am returning a portion of my subsidized loan: \$\_\_\_\_\_.
- ☐ I am returning all of my subsidized loan: \$\_\_\_\_\_.
- ☐ I am returning a portion of my unsubsidized loan: \$\_\_\_\_\_.
- ☐ I am returning all of my unsubsidized loan: \$\_\_\_\_\_.
- ☐ If returning a portion, total tuition/fees to be covered by remaining aid: \$\_\_\_\_\_.

- ☐ If disbursement check has been cashed:
- enclosed is a check/money order, payable to Klamath Community College in the amount of: \$\_\_\_\_\_.

I understand that I am responsible for any tuition, fees or other associated charges that were originally paid with my loan funds. Please allow 14 business days for processing if a re-issue check is needed.

**By signing this document, I approve the above changes be made to my Financial Aid package.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_