



KLAMATH
Community College

Loan Reinstatement/Cancellation Request 2021-2022

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

Last Name First Name Middle Initial

Social Security Number Student ID #

I would like to request that:

- My Subsidized Loan be reinstated for all eligible terms or the specified term(s) _____.
- My Unsubsidized Loan be reinstated for all eligible terms or the specified term(s) _____.
- My Subsidized and Unsubsidized Loans be reinstated for all eligible terms or the specified term(s) _____.
- Please cancel all of my loan funds as of _____
(Write in date)
- Please cancel only my Unsubsidized Loan funds as of _____
(Write in date)
- Please cancel only my Subsidized Loan funds as of _____
(Write in date)
- I will be transferring to another school. Please cancel all of my future financial aid effective _____
(Write in date)
- I have successfully completed 45-degree credits (classes 100 level or higher). Please evaluate my transcript for second year Stafford Loan limits.
- Other _____.

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

Signature: _____ Date: _____