



## 2024-2025 Loan Cancellation Form

You have the **Right to Cancel** the entirety or any portion of your student loan. Please submit the requests to cancel loan prior to the date of crediting to your account or within 14 days of notification.

Last Name	First Name	M.I.
Student Email Address		CFK Student ID
B. Requesting a Cancellati	on of Loan	
I want to cancel	my <b>entire Subsidized student loan</b> am	ount for the term:
☐ Fall 2024	☐ Spring 2025	☐ Summer 2025
I want to cancel	my <b>entire Unsubsidized student loan</b> a	amount for the term:
☐ Fall 2024	☐ Spring 2025	☐ Summer 2025
C. Certification and Signat	<u>ure</u>	
I certify that all information	provided is true and correct to the be	st of my knowledge.
Student Signature		Date