

STUDENT'S NAME: _____ GHC ID# 900 _____



GEORGIA HIGHLANDS COLLEGE

Office of Financial Aid

Financial Aid Cancellation Request Form

FINANCIAL AID WILL BE CANCELLED BASED ON YOUR SELECTION BELOW
PLEASE ALLOW 3-5 BUSINESS DAYS FOR THIS FORM TO SHOW AS RECEIVED IN SCORE.
PROCESSING TIMEFRAME IS UP TO TWO WEEKS.

Any Financial Aid Already Disbursed and Refunded Cannot Be Cancelled

Please indicate the semester/aid year for financial aid cancellation: _____

Select All Financial Aid Funds To Be Cancelled:

- _____ PELL GRANT
- _____ FSEOG (FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT)
- _____ DIRECT SUBSIDIZED LOAN
- _____ DIRECT UNSUBSIDIZED LOAN
- _____ DIRECT PARENT PLUS LOAN
- _____ ALTERNATIVE LOAN (example: Sallie Mae or College Avenue, etc.)
- _____ HOPE/ZELL MILLER SCHOLARSHIP
- _____ HERO SCHOLARSHIP

SPECIAL INSTRUCTIONS (write on the line below):

Acknowledgement: I am submitting this form to have all pending disbursements for the program(s) I indicated above to be cancelled and removed from my financial aid award for the semester(s) specified above. I understand that my account will be updated and the form processed within two weeks from the date received by the Office of Financial Aid.

Student Signature _____ Date _____

Please email completed form to finaid@highlands.edu (processing timeframe of up to two weeks once all final documents, transcripts, and/or information are received). You can also drop the form off at your local campus or FAX to (706) 295-6341.

Check your Financial Aid status at highlands.edu/financial-aid