



Financial Aid Office

Contact Us:
P: (972)881-5760
Financialaid@collin.edu

2023 – 2024 REPROCESSING FORM

Student Information

Name: _____

CWID: _____

CANCEL AWARD (Decline Awards): I am currently awarded Financial Aid and I am requesting to cancel my award. Important: If funds have been disbursed to your account, you may only cancel if you are ready to pay the amount due in full. Otherwise, we will not be able to process this request.

Award: [] GRANTS [] DIRECT SUBSIDIZED LOAN [] DIRECT UNSUBSIDIZED LOAN
[] PARENT PLUS LOAN [] WORK-STUDY [] ALTERNATIVE LOAN

Semester: [] 2023 FALL [] 2024 SPRING [] 2024 SUMMER

Reason for cancellation (REQUIRED): _____

REINSTATE AWARD: I am requesting a previously canceled Financial Aid award to be reinstated. Important: Awards can only be reinstated if they were previously awarded, funding is still available, cancel at previous school (s) and the deadline has not passed. Otherwise, we will not be able to process this request.

Award: [] GRANTS [] DIRECT SUBSIDIZED LOAN [] DIRECT UNSUBSIDIZED LOAN
[] PARENT PLUS LOAN [] WORK-STUDY [] ALTERNATIVE LOAN

Semester: [] 2023 FALL [] 2024 SPRING [] 2024 SUMMER

REDUCE LOANS: I am currently awarded Direct Loans and I am requesting to reduce my award. Important: If funds have been disbursed to your account, you may only cancel if you are ready to pay the amount due in full. Otherwise, we will not be able to process this request.

Reduce UNSUB Loan amount to: [] 2023 FALL \$ _____ [] 2024 SPRING \$ _____ [] 2024 SUM \$ _____

Reduce SUB Loan amount to : [] 2023 FALL \$ _____ [] 2024 SPRING \$ _____ [] 2024 SUM \$ _____

Reduce PARENT PLUS Loan to: [] 2023 FALL \$ _____ [] 2024 SPRING \$ _____ [] 2024 SUM \$ _____

Reduce Alternative Loan to: [] 2023 FALL \$ _____ [] 2024 SPRING \$ _____ [] 2024 SUM \$ _____

My signature below verifies that I have read and understand this form. I acknowledge that by signing this form I accept responsibility for repaying all student loan debt in its entirety and will not default on any of my federal student loans.

Student Signature

Date:

Office use only:

Aid Year: _____ Campus: _____ Date: _____ RRAAREQ Code: REPROC Status Code: _____ Initials: _____