Financial Aid and Scholarships
California State University, Los Angeles
5151 State University Drive, SSB 2330
Los Angeles, CA 90032-8402
Phone: (323) 343-6260

2024-2025

For office use only:

Loan Cancellation Request Form

Use this form to request a cancellation of your previously **disbursed** student loan(s). Submit this form no later than 14 days from the date when your student loans were disbursed to your GET Account. Requests submitted after 14 days will not be processed by Cal State L.A, funds must be returned to your loan servicer directly. Please note that there is a possibility that you will be billed for funds already disbursed to your GET Account.

If your loans have not been disbursed to your GET Account, do not submit this form. You will need to submit a FAN Change Form to request a cancellation.

Last Name	First Name	M.I.	Campus Identification Number (CIN)

ADJUSTMENTS

I would like to cancel my loan(s) for the following term(s): ☐ Fall ☐ Spring ☐ Summer

I would like to cancel the following loan(s):

Loan Type	Cancellation Amount
Subsidized Direct Loan	$
Unsubsidized Direct Loan	$
Graduate PLUS Loan	$
Parent PLUS Loan	$

REQUIREMENTS

If you cashed your **financial aid refund OR if funds have been electronically deposited** to your checking/savings account, you are required to attach payment to this form for the amount you are requesting to cancel.

If you **have not** cashed your financial aid refund, you are required to return it along with this form. If the financial aid refund contains other funds (i.e., grant monies), a new refund check will be re-issued to you.

STUDENT SIGNATURE_____ DATE_____
*Note: Loan cancellation request will not be processed without student signature.

PARENT SIGNATURE_____ DATE_____
*Note: PLUS Loan cancellation request will not be processed without parent signature.