



Xavier University of Louisiana

Office of Student Financial Aid

1 Drexel Dr. Box 40 New Orleans, LA 70125

Tel: (504) 520-7835 Fax: (504) 520-7906

Email: finaid@xula.edu

FINANCIAL AID CANCELLATION

This form should be used to cancel any financial aid that you have accepted for the academic year (Fall/Spring semesters).

PRINT LEGIBLY AND CLEARLY IN INK

Last Name:	First Name:	M.I.:
School ID#:	Telephone #:	
Home Address:	City, State:	Zip Code:
Major:	Classification:	XULA E-Mail:

Semester (circle one): **Fall 2024** **Spring 2025** **Fall 2024 - Spring 2025**

TYPE OF AID: Check applicable circle(s). Please select the aid you would like to cancel for the semester or year.

REASON

- Direct Subsidized Loan _____
- Direct Unsubsidized Loan _____
- Parent PLUS Loan* _____
- Grad PLUS Loan (grad students only) _____
- PELL Grant _____
- Other: _____

By signing this worksheet, I understand that I am asking to have the above types of financial aid cancelled. I also understand that cancelling my financial aid does not withdraw me from my classes, nor does it keep me from being responsible for any costs owed by me to the university. I understand that to withdraw from the university I must contact the Registrar's office.

Student's Signature

Date