

ROSE STATE COLLEGE

Financial Aid Office

6420 SE 15th St • Midwest City, OK 73110 • Student Services Building, Room 200
Phone: (405) 733-7424 • Fax: (405) 736-0359 • Email: finaid@rose.edu

2026-2027 Financial Aid Cancellation Form

Student Name: _____ RSC Student ID#: _____

****Please fill out in Blue or Black Ink only****

****Scanned or printed copies only, photos of completed forms will not be accepted****

Section A: Please select the semester you are requesting to be cancelled:

Fall 2026 Spring 2027 Summer 2027

Will you still be enrolled at least half time during this semester at RSC? Yes No *(If No, see Section D)*

Section B: Please select the type of aid you are requesting to be cancelled:

- All Financial Aid (Grants, Loans, and Work Study)
- Federal Pell Grant
- Federal Supplemental Aid Grant (FSEOG)
- Federal Work Study
- Federal Direct Subsidized Loan
- Federal Direct Unsubsidized Loan

Section C: Please specify the reason(s) for cancellation; check all that apply:

- No Longer Attending RSC
- Personal/Family Reasons
- Medical Reasons
- Transferring to Another Institution
- Other: _____

Section D: Please read the information below and sign.

By signing this form:

- ⇒ I understand if I am a Direct Loan Borrower I **must** complete the Loan EXIT COUNSELING if I am leaving RSC or enrolling below half time. I will log on to StudentAid.gov using my FSA ID, choose *Exit Counseling* and complete this process. **Please attach printed confirmation of your completed Exit Counseling.** Our office is unable to cancel your student loan until you have completed the required Exit Counseling.
- ⇒ I understand, if I'm transferring to another college I must log into my FAFSA and add that school's code. Financial Aid does not automatically transfer.
- ⇒ I understand I may only receive aid at one institution per term.
- ⇒ I understand that if I decide to attend RSC at a later date I may not be eligible to receive certain awards I may have been previously packaged with.
- ⇒ I understand that I still must drop any classes that I am registered in listed in Section A of this form. (Failure to drop the classes within 100% refund of the semester may result in a balance owing.)

Student Signature: _____ Date: _____

RSC Financial Aid Office Use Only

Aid Cancelled _____ EXIT Counseling completed? (Select one) Y N Not required