

**Student's Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

ctcLink ID Number (###-##-####): \_\_\_\_\_

Check all the Quarters that apply:  Summer  Fall  Winter  Spring

**Award Reactivation**

Select the aid you would like to **REACTIVATE**:

GRANTS: State/Federal/Institutional Grant Funding

Other External Funding: \_\_\_\_\_

Please note: For loan reactivation, you will be required to complete the Loan Request Form.

**Reason for reactivation:**

\_\_\_\_\_

**Award Cancellation**

Select the aid you would like to **CANCEL**:

ALL AWARDS

GRANTS

LOANS

Subsidized Direct Loan

Unsubsidized Direct Loan

Please note: To cancel Workstudy funding, please contact Student Employment.

**Reason for cancellation:**

\_\_\_\_\_

**Sign the Worksheet**

By signing this form:

- I understand that aid reactivation requires that I cancel all aid awarded at another institution for this academic year.
- I understand that I may not receive all funding sources that were previously cancelled when requesting aid reactivation.
- I understand that I still must drop any classes that I am registered in for the quarters I do not plan to attend or pay at my own expense.
- I understand that this is not an official withdrawal form and that I must complete the official withdrawal process with the Registration Office.
- I understand that I must reactivate my aid if I plan on attending within the same year and that I may not be eligible for the same amount of funding.
- I understand that I must complete a new FAFSA if I plan on attending the next academic year.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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