

FINANCIAL AID AND SCHOLARSHIPS

UNIVERSITY of CALIFORNIA • IRVINE

102 Aldrich Hall
Irvine, CA 92697-2825

Tel: (949) 824-8262
ofas.uci.edu

Form must be uploaded to: ZotAid

2025-26 Student Loan Cancellation Request

Student Name: _____

UCI ID: _____

E-mail: _____

Phone Number: _____

Please indicate the type of loan you would like to cancel and the applicable term(s):

FEDERAL LOAN PROGRAMS:

	Fall Term	Winter Term	Spring Term	Summer Term
☐ Subsidized Direct Loan	☐	☐	☐	☐
☐ Unsubsidized Direct Loan	☐	☐	☐	☐
☐ Graduate PLUS Direct Loan	☐	☐	☐	☐
☐ TEACH Grant	☐	☐	☐	☐

Our office will be able to process your request for cancellation if your Federal loan has not yet been disbursed or it has been 14 days or less from the date we emailed you of your right to cancel your loan. This means that we will take your loan amount back and return funds to the lender for you. This will reduce your debt. The direct loan servicer should send you an updated statement showing the reduction. The return of loan funds will also show on NSLDS (National Student Loan Data System) at www.nslds.ed.gov. Since the direct loan servicer updates NSLDS, it will take about 90 days for the returned amount to show up there.

If it has been more than 14 days, DO NOT SUBMIT THIS FORM. Instead, you will need to contact your lender/ servicer regarding your loan repayment. To learn who your lender/servicer is, contact Applicant Services at (800) 557-7394 or log on to NSLDS at www.nslds.ed.gov and look under 'Financial Aid Review.'

Be advised: Should you cancel your loan and then withdraw from UCI later in the school year, you will no longer have these funds available to pay any bill you may incur.

UCI LOAN PROGRAMS:

	Fall Term	Winter Term	Spring Term	Summer Term
☐ University / Hawk / DREAM Loan	☐	☐	☐	☐

☐ **I want to cancel only the university-issued check.**

☐ **I want to cancel both the check and the loan.**

If you are returning a university-issued check, please attach the check to this form.

If you are requesting to cancel a loan that has already been paid to you, our office will be posting charges to your Zot account.

Failure to pay your bill will result in a hold.

Student Signature: _____ Date: _____

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2025-26 Parent PLUS Loan Cancellation Request

Student Name: _____

UCI ID: _____

E-mail: _____

Phone Number: _____

Cancellation Request

Our office will be able to process your request for cancellation if your loan has not yet been disbursed or it has been 14 days or less from the date we emailed you of your right to cancel your loan (NOTE: if you were mailed a check, please be aware that you still have only 14 days from the date of the email, not from the date you received the check). This means that we will take your loan amount back and return funds to the lender for you. This will reduce your debt. The direct loan servicer should send you an updated statement showing the reduction. The return of loan funds will also show on NSLDS (National Student Loan Data System) at www.nslds.ed.gov. Since the direct loan servicer updates NSLDS, it will take about 90 days for the returned amount to show up there.

If it has been more than 14 days from the date we emailed you of your right to cancel your loan, DO NOT SUBMIT THIS FORM. Instead, you will need to contact your lender/servicer regarding your loan repayment. To learn who your lender/servicer is, contact Applicant Services at (800) 557-7394 or log on to NSLDS at www.nslds.ed.gov and look under 'Financial Aid Review.'

Indicate the applicable term(s) for which you would like to cancel your loan:

Fall Term

☐

Winter Term

☐

Spring Term

☐

Summer Term

☐

☐ **I want to cancel only the university-issued check.**

☐ **I want to cancel both the check and the loan.**

If you are returning a university-issued check, please attach the check to this form.

If you are requesting to cancel a loan that has already been paid to you, our office will be posting charges to your student's Zot account.

Be advised: Should you cancel your loan and your student withdraw from UCI later in the school year, you will no longer have these funds available to pay any bill your student may incur.

Student Signature: _____ Date: _____

Borrower Parent Name / Signature _____ / _____ Date: _____