

OFFICE OF FINANCIAL AID AND VETERANS AFFAIRS

1011 PAGE ST. • TROY, NC 27371 • (910) 898-9600 • FAX: (910) 576-2176 Federal School Code – 008087 · https://www.montgomery.edu/financial-aid

2023-24 Cancellation of Authorization to Apply Financial Aid

Please use this form to cancel authorization to have financial aid funds pay for allowable charges such as tuition, fees, books and supplies

Student's Name (Last, First, Middle) (Maiden)		MCC School ID (Required)	
Current Mailing Address	,		
	City	State	Zip Code
Home Phone: ()	Work Phone: ()	Cell :()
Date of Birth/ Personal Er	nail:	MCC Email:	
Please indicate the semester you are appealing: NOTE: This form is only applicable for term,	FALL 2023 one term at a time. If you you must complete a sep		SUMMER 2024 me process in a future
Cancellation Statement			
I understand that by submitting this form I am authorization to apply financial aid funds to co	. •		
I understand that MCC charges not paid by the cancellation of classes. Furthermore, I unaid funds have been removed will be my resp	derstand that any education	•	•
I understand that this notification must be pro- understand that this cancellation is not retroac charges were incurred before this form is rece charges.	ctive—it takes effect on the	date that the school recei	ves it. If authorized
My signature confirms that I have read and ur current information.	nderstood all instructions ar	nd that I have provided acc	curate, complete, and
Student's Signature:		Date:	

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