



**TRINITY VALLEY**  
COMMUNITY COLLEGE

## 2025 - 2026 Request to Cancel Aid at TVCC - Parent PLUS Loan

**\*\*\*If financial aid has been disbursed on the student account for over 30 days, aid cannot be canceled unless an error has been found, or if the student is not eligible for the funds.\*\*\***

\_\_\_\_\_  
**Parent Name**

\_\_\_\_\_  
**SSN**

\_\_\_\_\_  
**Student Name**

\_\_\_\_\_  
**SSN or TVIN**

I would like to cancel the Parent PLUS loan for the above-named student for the semester(s) below:

**Fall** \_\_\_\_\_ **Spring** \_\_\_\_\_ **Summer** \_\_\_\_\_

\_\_\_\_\_  
**Parent Signature**

\_\_\_\_\_  
**Date**

The parent has requested the pending or awarded Parent PLUS Loan from TVCC be cancelled for the semester(s) indicated above.

I certify that the Parent PLUS Loan for the student listed above has been cancelled for the semester(s) indicated. All agencies, and authorities have been notified of the cancellation.

\_\_\_\_\_  
**TVCC Authorized Signature**

\_\_\_\_\_  
**Date**