STUDENT’S NAME: _____________________  Student’s TCTC ID: _______________________

Student’s TCTC Email: ___________________  Student’s Phone Number: __________

NOTE: Student is to complete this form and return it to TC Central. The loan will not be cancelled or funds returned until this form has been completed and signed by the student.

Date: __________________  Academic Year: __________________

Name: ___________________________  Student T#: __________________

Please Print

Lender: ________________________________

<table>
<thead>
<tr>
<th>Check One</th>
<th>Portion of Loan to be Cancelled OR Funds to be Returned</th>
<th>Net Amount you want Cancelled OR Returned</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fall Disbursement</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>Spring Disbursement</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>Summer Disbursement</td>
<td>$</td>
</tr>
</tbody>
</table>

By signing this document, I understand I am responsible for any debt that may still be required on my Billing Statement. I understand this form will NOT be processed if it is NOT completed entirely and signed.

Student Signature (required) ___________________________  Date __________________

Return the completed form to any of the 4 campuses. We accept this form in person, postal mail (PO Box only), fax, and e-mail. TCTC Financial Aid takes every effort to secure any sensitive data. Please do not send sensitive documents or personal information via unsecure methods to the financial aid office.

Fax: (864)646-1890  E-mail: tccentral@tctc.edu

Pendleton Campus  Anderson Campus  Easley Campus  Oconee Campus
Tri-County Technical College  Tri-County Technical College  Tri-County Technical College  Tri-County Technical College
P O Box 587  511 Michelin Boulevard  1774 Powdersville Road  552 Education Way
Pendleton SC 29670  Anderson, SC 29626  Easley, SC 29642  Westminster, SC 29693
(864)646-8282 Opt. 1  (864)260-6700  (864)220-8888  (864)613-1900

RRAAREQ: LCRALT