



**2018-2019
Refund Cancellation**

Student Name _____

Bergen ID: _____

Phone Number: _____

Please use this form to cancel a refund issued to you from Bergen Community College. You may submit this completed form to a One-Stop representative.

Section 1: Cancellation Authorization

I _____ authorize Bergen Community College to do one of the following:

- Cancel the refund check issued
(Check must be attached to this form for this option)

- Cancel Federal Direct Stafford Loans
(If loan cancellation generates a balance student will make payment to Bursar)

Please note:

- Processing may take 5-7 business days.
- Direct Loan amounts will be rounded to whole dollars.
- Direct Loan funds returned to the lender within 120 days from the day of disbursement (to your Bergen account) will have the origination fees reduced in proportion to the amount returned.

Section 2: Signature and Certification

By signing this worksheet you certify that all of the information reported on it is complete and correct.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

The student must sign and date.

Student's Signature

Date