

# EDUCATIONAL CREDIT MANAGEMENT CORPORATION

# CANCEL REQUEST

**PURPOSE:** To notify ECMC that the entire loan, or one or more disbursements, must be cancelled.  
*Note: Do not report partial cancellation of a disbursement (refunds) on this form. Refunds received from schools should be reported via ECMC's refund request form.*

## I. LENDER/SUBMITTER INFORMATION

DATE: \_\_\_\_\_ PAGE: \_\_\_\_\_ OF \_\_\_\_\_

LENDER I.D. NUMBER: \_\_\_\_\_ BRANCH: \_\_\_\_\_

SUBMITTER NAME/ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

To Cancel  
entire loan  
of \$2625 →

CANCEL  
ENTIRE  
LOAN

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LOAN AMOUNT

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\$2625

**EXAMPLE**

  
  

To Cancel two  
or more  
disbursements  
→

CANCEL DISBURSEMENTS					
DISBURSEMENT			DISBURSEMENT		
#	DATE	AMOUNT	#	DATE	AMOUNT
2	3-1-03	\$875	3	5-1-03	\$675

II. LOAN INFORMATION					III. CANCELLATION INFORMATION						
BORROWER NAME (LAST, FIRST, MI)	SOCIAL SECURITY NUMBER	LOAN TYPE	GUARANTEE DATE	FIRST DISBURSE- MENT DATE	CANCEL ENTIRE LOAN	CANCEL DISBURSEMENTS					
					LOAN AMOUNT	DISBURSEMENT			DISBURSEMENT		
					<input type="checkbox"/> \$	#	DATE	AMOUNT	#	DATE	AMOUNT
					<input type="checkbox"/> \$			\$			\$
					<input type="checkbox"/> \$			\$			\$
					<input type="checkbox"/> \$			\$			\$
					<input type="checkbox"/> \$			\$			\$
					<input type="checkbox"/> \$			\$			\$
					<input type="checkbox"/> \$			\$			\$
					<input type="checkbox"/> \$			\$			\$
					<input type="checkbox"/> \$			\$			\$
					<input type="checkbox"/> \$			\$			\$

Return completed request to:

**EDUCATIONAL CREDIT MANAGEMENT CORPORATION**  
**ATTENTION: FINANCE**  
**1 IMATION PLACE, BUILDING 2**  
**OAKDALE, MN 55128**

**IV. SIGNATURE**  
**ECMC records cannot be changed without the submitter's signature**

Submitter \_\_\_\_\_ Date \_\_\_\_\_

Name and Title (Please Print) \_\_\_\_\_ Telephone Number \_\_\_\_\_

## **CANCEL REQUEST INSTRUCTIONS**

**PURPOSE:** To notify ECMC that the entire loan, or one or more disbursements, must be canceled.

### **INSTRUCTIONS:**

#### **I. PROVIDE LENDER/SUBMITTER INFORMATION**

Write the date, page number, lender I.D. number, branch number (if any), and your institution's name and address in the space provided (upper left corner of form).

#### **II. PROVIDE LOAN INFORMATION**

Write the borrower name, social security number, loan type (CL = Federal Consolidation Loan, PL = Federal PLUS Loan, SF = Federal Stafford Loan, SL = Federal SLS, SU = Unsubsidized Stafford Loan), guarantee date and the first disbursement date of each loan in the space provided.

#### **III. PROVIDE CANCELLATION INFORMATION**

To Cancel An Entire Loan→ complete the CANCEL ENTIRE LOAN column by placing a check mark in the box and writing the loan amount (whole dollars) to be canceled.

To Cancel Disbursements→ complete the CANCEL DISBURSEMENTS columns by writing the disbursement number, disbursement date and disbursement amount (whole dollars) of each full disbursement to be canceled.

#### **IV. SIGN AND DATE REQUEST**

Sign your name, print your name and title, provide the current date and your telephone number (including area code) in the space provided (bottom right corner of the form).