

## Student Financial Aid Authorization Cancellation Form

Effective on the date signed below, I withdraw the Financial Aid Authorization that I previously granted to the University of Wisconsin – Milwaukee ("UWM"). The Financial Aid Authorization allowed my awarded financial aid funds to automatically apply to my "other cost-of attendance charges" (as defined in the Financial Aid Authorization form) including charges that I incurred during previous semesters.

Despite this withdrawal of financial aid authorization, I acknowledge that I understand that federal regulations will continue to allow UWM to automatically apply the balance of my awarded financial aid funds to current tuition, fees, and room and board charges. I understand that I am and will continue to be responsible for paying directly to UWM all my other cost-of-attendance charges because I have signed this cancellation form.

Student's Last Name (Print)

Student's First Name (Print)

Student's Campus ID No.

Student's Signature

Date