

Dear Heritage University Financial Aid Office,

I, _____ would like to have 100% of the financial aid I received fall 20 returned to its source, including any portion I may have earned based on the days I did attend. I would like to return these funds to preserve my financial aid resources for when I continue my education.

Date: _____

Signature: _____ Date: _____

Please Fax, email, or mail this document to:

Financial_aid@heritage.edu

Fax: 509 865-1853

3240 Fort Road

Toppenish, WA 98948