

**2019-2020 LOAN ADJUSTMENT FORM**

Student Name: \_\_\_\_\_ ID Number: C# \_\_\_\_\_

My signature indicate the changes:

- Have been discussed with my Student Accounts Representative
- Will be processed for the entire academic year & adjustments will be made in accordance with the awards need level
- The Student Accounts representative will provide the estimated balance due where applicable.
- Any balance due as a result of a reduction and/or cancellation will be resolved immediately
- I understand how the changes will impact future semesters

**CANCELLATIONS:** Please cancel, for the academic year (Check all that apply):

- Federal Perkins Loan \$ \_\_\_\_\_  Direct Parent Plus Loan \$ \_\_\_\_\_
- Federal Direct Subsidized Loan \$ \_\_\_\_\_  Graduate Plus Loan \$ \_\_\_\_\_
- Federal Direct Unsubsidized Loan \$ \_\_\_\_\_  Private Loan \$ \_\_\_\_\_

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

Student Account Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

Estimated Balance Due FA2019 \_\_\_\_\_ Estimated Balance Due SP2020 \_\_\_\_\_

By signing this I understand this change is for the entire academic year and any balance due will be resolved; unless otherwise noted by the Student Accounts Representative

**REDUCTIONS:** Please reduce, for the academic year, to the listed amount (Check all that apply):

- Federal Direct Subsidized Loan \$ \_\_\_\_\_  Graduate Plus Loan \$ \_\_\_\_\_
- Federal Direct Unsubsidized Loan \$ \_\_\_\_\_  Private Loan \$ \_\_\_\_\_
- Direct Parent Plus Loan \$ \_\_\_\_\_

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

Student Account Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

Estimated Balance Due FA2019 \_\_\_\_\_ Estimated Balance Due SP2020 \_\_\_\_\_

This change will affect all disbursement periods equally. Adjustments can affect the net disbursement because of origination fees.

**REINSTATEMENTS:** Please reinstate for the academic year to the loan amount listed:

- Federal Direct Subsidized Loan \$ \_\_\_\_\_  Graduate Plus Loan \$ \_\_\_\_\_
- Federal Direct Unsubsidized Loan \$ \_\_\_\_\_  Private Loan \$ \_\_\_\_\_
- Direct Parent Plus Loan \$ \_\_\_\_\_

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

This change will be processed for all disbursement periods equally.

Please return the completed form to the Office of Financial Assistance