

## Loan Adjustment Form 2020-2021

Name \_\_\_\_\_ EMPLID \_\_\_\_\_

I wish to make the following adjustments to my awards. Please check off the appropriate box(es) below:

Sum/Fall/Spr \_\_\_\_\_ Sum/Fall \_\_\_\_\_ Fall/Spr \_\_\_\_\_ Summer only \_\_\_\_\_ Fall only \_\_\_\_\_ Spring only \_\_\_\_\_

Current Fund Amount:	Reduce by:	Increase by:	Cancel
Direct Unsubsidized \$			
Direct Graduate PLUS \$			
Other \$			

**Please note, loan-processing time is 7-14 business days.**

**Please sign:** I declare that the above information is correct. I understand that if I have accepted a Stafford or Grad PLUS that I must have a Promissory Note on file with my lender before funds will be available, and that I may still reject the loan by submitting a request to the Financial Aid office. I am aware that I may repay the loan early without penalty, except that loan fees will not be rebated in the case of early repayment. I am also aware that I must be registered in at least half time enrollment, Grad/Med- 5crs, in order to be eligible for financial aid.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date