

Complete this form if you want to cancel or make changes to your student loans.

Student Name _____ Student ID _____

	Current Loan Amount	Reduced Loan Amount	Cancel <input type="checkbox"/>
Federal Direct Subsidized Loan	\$ _____	\$ _____	
Federal Direct Unsubsidized Loan	\$ _____	\$ _____	
Federal Direct Parent PLUS Loan	\$ _____	\$ _____	
Federal Direct Grad PLUS Loan	\$ _____	\$ _____	
Private Loan* _____ Lender	\$ _____	\$ _____	

***To receive an increase for a private loan, you must complete an application with your private loan lender.**

Instead of receiving my loan(s) for fall and spring semesters, please apply loan(s) to the following terms:
Check 1, 2, or 3 consecutive terms _____ summer _____ fall _____ spring

INCREASE – Due to class standing

_____ I have advanced in class standing and would like an increase of \$ _____ in loan funds.
I understand that this request will not be processed until I have met all eligibility requirements.

INCREASE – Due to Independent Status

_____ I am an independent student (or my parent has been denied a PLUS loan this year) and would like an increase of \$ _____ in loan funds.

ONE SEMESTER ATTENDANCE

_____ I am notifying the Financial Aid Office that I am attending:
_____ Summer semester only _____ Fall semester only _____ Spring semester only

If you are attending one semester only, please list your graduation date: _____

If you decrease or cancel your loan(s), please understand that you are still responsible to pay for any charges owed to Shawnee State University that would have been covered by your loan(s).

I understand that my signature on this form authorizes the Financial Aid Office to change my student loans according to the above request.

Student Signature _____ Date _____

If requesting changes to a Parent PLUS Loan, your parent must sign this form.

Parent Signature _____ Date _____