



Revision Request Form

Student Name: _____ **Student ID: W** _____

Please check the appropriate loan revision you would like reviewed and sign this form. Loan adjustments are made on an individual basis depending on your current loan status. Revisions should be requested for the full year or for your enrollment period if less than a full year. Based on the revision requested, approved revisions may result in additional disbursements or a balance due.

Aid Year: 20____ - 20____

Direct Subsidized Loan

- ☐ Cancel my Direct Subsidized Loan (may only occur if less than 14 days from date of disbursement)
- ☐ Cancel my unpaid disbursement for (check all that apply): ☐ Fall ☐ Spring ☐ Summer
- ☐ Decrease my loan by \$_____ for a total of \$_____ accepted for the year, or
- ☐ Increase my loan by \$_____ for a total of \$_____ accepted for the year, or
- ☐ Increase my loan to the maximum amount allowed.

Direct Unsubsidized Loan

- ☐ Cancel my Direct Unsubsidized Loan (may only occur if less than 14 days from date of disbursement)
- ☐ Cancel my unpaid disbursement for (check all that apply): ☐ Fall ☐ Spring ☐ Summer
- ☐ Decrease my loan by \$_____ for a total of \$_____ accepted for the year, or
- ☐ Increase my loan by \$_____ for a total of \$_____ accepted for the year, or
- ☐ Increase my loan to the maximum amount allowed.

PLUS Loan

- ☐ Cancel my Parent PLUS loan (may only occur if less than 14 days from date of disbursement)
- ☐ Cancel my unpaid PLUS loan disbursement(s) for (check all that apply): ☐ Fall ☐ Spring ☐ Summer
- ☐ Decrease my PLUS loan by \$_____ for a total of \$_____ accepted for the year, or
- ☐ Increase my PLUS loan by \$_____ for a total of \$_____ accepted for the year, or
- ☐ Increase my PLUS loan to the maximum amount allowed.

Parent PLUS Loan Denied

My Parent PLUS Loan was denied, please award/increase my Direct Unsubsidized Loan based for the following:

- ☐ Maximum eligibility
- ☐ Specific amount (may not exceed maximum eligibility): \$_____

Student's Name: _____ **University ID:** _____

Change in Class Standing

☐ I have had a change in my class standing and would like my loan eligibility increased if eligible. I understand the increase will be effective for the term after my new class standing was obtained.

Undergraduate to Graduate

☐ I have graduated as an undergraduate for the Fall 2016 semester and have been accepted as a Graduate student for the Spring 2017 semester.

Request to cancel ALL aid

☐ I am requesting to cancel **ALL** financial aid awards offered to me.

Student's Signature (Required)

Date