2022-2023 Parent PLUS Adjustment Request

Student Name: ___________________________ Loyola ID: ________________
(Please print) (Your 11-digit Loyola ID number begins 0000)

If reducing or cancelling a loan, this form must be submitted no later than 30 days after disbursement. We will process the change and send the funds back to the lender on your behalf. **Note: Reducing or cancelling a loan after it has disbursed may result in a balance on your account.** All amounts should be gross amounts before origination fees are removed. For more information about the PLUS loan and origination fees, please visit https://studentaid.ed.gov/sa/types/loans/plus/parent

Decrease PLUS Loan (choose 1)

☐ Cancel entire loan
☐ Reduce entire loan to $__________

☐ Reduce loan amount to: ☐ Fall $_______ ☐ Spring $________ ☐ Summer $________

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Increase PLUS Loan (choose 1)*

☐ Increase entire loan to $__________

☐ Increase loan amount to: ☐ Fall $_______ ☐ Spring $________ ☐ Summer $________

*Please include existing plus additional loan amount.

I understand that rejected loan awards cannot be replaced with grant assistance. I understand that I am responsible for all educational expenses not covered by other financial aid programs. I understand that previously reduced or cancelled awards will be reinstated only if requested before the end of the term.

Parent (Borrower) Signature* ___________________________ Date ______________________

*Typed and digital signatures are not acceptable