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](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 $________

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](https://studentaid.ed.gov/sa/types/loans/plus/parent).

### 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. *By signing this form, I authorize Loyola University Chicago to submit a new application that will run a credit check to the Department of Education on my behalf if my credit decision has expired.*

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

**Parent (Borrower) Signature:** __________________________  
**Date:** __________________________

*Typed and digital signatures are not acceptable.*