2019-2020 Undergraduate Student Financial Aid Change Form
INCREASE Loans or Work Study

Student’s Full Name: ____________________________
(LEGAL NAME - PRINT) first middle last

University ID: □□□□□□□□□□ or SIS ID: □□□□□□□□□

Loans may only be increased up to the eligible amount for an academic year. If you request an amount greater than your eligible amount, then no change will be made. If you are eligible, and wish to increase your loan amount, complete this section and submit to Student Financial Services to the address or Fax number shown above. An increase request cannot be made after the end of a term.

No forms will be accepted for fall 2019 semester loans after December 6, 2019. No forms will be accepted for spring 2020 semester loans after April 29, 2020.

FEDERAL LOAN INCREASE REQUEST

Please indicate your desired increase loan amount by the type of loan below.

**Federal Unsubsidized Loan**

For which semester/s would you like to change your loan amount? □ Fall □ Spring □ Summer □ J-Term

Determine the TOTAL LOAN AMOUNT you would like to request, by term, and indicate the TOTALS below. Remember that loans may only be increased up to the eligible amount for an academic year. If you request an amount greater than your eligible amount, then no change will be made. If amount is left blank, SFS will assume no change is requested.

Total New Amount Requested for: Fall $__________ Spring $__________ Summer $__________ J-Term $__________

**Federal Subsidized Loan**

For which semester/s would you like to change your loan amount? □ Fall □ Spring □ Summer □ J-Term

Determine the TOTAL LOAN AMOUNT you would like to request, by term, and indicate the TOTALS below. Remember that loans may only be increased up to the eligible amount for an academic year. If you request an amount greater than your eligible amount, then no change will be made. If amount is left blank, SFS will assume no change is requested.

Total New Amount Requested for: Fall $__________ Spring $__________ Summer $__________ J-Term $__________

**Private Loan**

PLEASE NOTE: To increase your private loan amount you must apply for a new loan with your lender. Student Financial Services cannot initiate an increase to a private loan.
Student’s University ID: □□□□-□□□□□□ or SIS ID: □□□□□□□

Student’s Full Name: ________________________________
(LEGAL NAME - PRINT) first middle last

Parent PLUS Loans

For which semester/s would you like to change your loan amount? □ Fall □ Spring □ Summer

Determine the TOTAL LOAN AMOUNT you would like to request, by term, and indicate the TOTALS below. Remember that loans may only be increased up to the eligible amount for an academic year. If you request an amount greater than your eligible amount, then no change will be made. The increase request cannot be larger than the original disbursement amounts. A request for greater than the original amount will require a new Parent PLUS application. If amount is left blank, SFS will assume no change is requested. Parent PLUS loans require the parent signature below.

Total New Amount Requested for:
Fall $_________________ Spring $_________________ Summer $_________________

Borrowing Parent’s Name ________________________________ Last 4 digits of Borrowing Parent’s SSN __________

Borrowing Parent’s Signature _____________________________________________ Date___________________

Do you want the new amount to be increased to cover loan fees? Y or N

Institutional Loan

☐ I have completed my Master Promissory Note and wish to have my previously-cancelled Institutional Loan reinstated.

FEDERAL WORK-STUDY INCREASE REQUEST

Federal Work-Study may only be increased up to the eligible amount for an academic year. If you request an amount greater than your eligible amount, then no change will be made. If you are eligible, and wish to increase your Work-Study amount, complete this section and submit the form to Student Financial Services to the address or Fax number shown above. Increases can only be done if you decreased in error and must be requested within 3 days for reduction/cancellation.

Federal Work Study: I am requesting an increase to my current Federal Work Study award total.

Total New Work-Study Amount Requested for:
Fall $_________________ Spring $_________________

I understand that Federal Loans and Work-Study awards may only be increased up to the eligible amount for each academic year. Therefore, if I have requested any amounts to be increased above my eligibility, I understand that no change will be made to my awards. Finally, I understand that I am responsible for all educational expenses not covered by my financial aid.

STUDENT’S SIGNATURE ________________________________ Date___________________

3/20/2019