

Student Name \_\_\_\_\_ Student ID or SSN \_\_\_\_\_ Phone \_\_\_\_\_

**2017-18**

**LOAN ADJUSTMENT REQUEST/FEDERAL WORK STUDY DECLINE**

Federal Direct Stafford Loan Annual Borrowing Limits		
Academic/Class Level	Maximum Direct Loan Amount (Subsidized & Unsubsidized combined)	Maximum Subsidized Loan Amount
1 <sup>st</sup> Year Students	\$5,500 - Dependent students \$9,500 - Independents/Parent PLUS denial	\$3,500
2 <sup>nd</sup> Year Students; *or successfully completed 24 credits in your program	\$6,500 - Dependent students \$10,500-Independents/Parent PLUS denial	\$4,500
<b>*You are considered a 2<sup>nd</sup> year student after successfully completing 24 credits in your program. Please note that not all programs will have 2<sup>nd</sup> year eligibility.</b>		

**Terms Attending:**

**Fall**

**Winter**

**Spring**

**Summer**

I want to **increase** my loans because my grade level has changed from 0-23 credits to 24 or more credits

Please make the following adjustments to my student loans:						
Loan	Type of Adjustment			Total Amount Requested for Year		
Subsidized Accept	Increase	Decrease	Cancel	\$ _____	Or	Maximum Eligibility
				\$ _____	Or	Maximum Eligibility
Unsubsidized Accept	Increase	Decrease	Cancel	\$ _____	Or	Maximum Eligibility
				\$ _____	Or	Maximum Eligibility
Parent PLUS	Decrease		Cancel	\$ _____	Or	Maximum Eligibility
				\$ _____	Or	Maximum Eligibility
Comments/Explanations:						

(I understand that IHCC will process Subsidized loan funds up to the annual amount above, or my maximum eligibility, whichever is smaller, with the remainder in Unsubsidized loan funds.)

Request additional Unsubsidized loan due to PLUS loan denial  
 Due to my parent's PLUS Loan denial, please increase my unsubsidized loan by \$ \_\_\_\_\_.  
 (Maximum of an additional \$4,000 or remaining unmet need, whichever is less)

I wish to **DECLINE** my Federal Work study Award for 2017/18. Please check one of the following  
 Please recalculate my awards to determine additional eligibility for loans.  
 I do not wish to apply for additional loans.

**Student's Signature** \_\_\_\_\_ (Required) \_\_\_\_\_ Date \_\_\_\_\_

**Parent's Signature** \_\_\_\_\_ \* \_\_\_\_\_ Date \_\_\_\_\_  
 (\*Only Required for Parent Plus Loan Adjustments)

***In addition, please be advised that you have the right to cancel or reduce your loan(s) by contacting OneStop.***

FOR OFFICE USE ONLY: Date Modified: ____/____/____ Loan Adjusted by FAA Initials:	Notes:
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