## 2023-2024 LOAN CHANGE REQUEST FORM

| Student Name  | Student ID#  |
|---|--|
| Email   | Phone  |
| ·   | to be made to your student/parent loans. Please note: Our office will contact you if we cannot complete your request.                        |
| Select one of the following:   Fall Seme                              | ester Spring Semester  |
| RETURN ENTIRE CREDIT BALANCE I would like to return the entire amount | of my credit balance. Please return to my:   |
| Subsidized loan Unsubsidized loan                                     | n Parent PLUS loan Graduate PLUS Loan Private loan   |
| RETURN A SPECIFIC AMOUNT  I would like to return \$                   | Please return to my:  n  |
| RETURN ENTIRE LOAN AMOUNT I would like to return the entire amount    | of my (check all that apply):  |
| Subsidized loan Unsubsidized loa                                      | n Parent PLUS loan Graduate PLUS Loan Private loan   |
| Special requests:   |  |
| Your request will be processed within 10                              | business days.   |
|   | vide a plan to Student Account Services to pay any resulting balance.<br>timely manner may result in a hold on your account which can affect |
| Borrower Signature  | <br>Date   |
| Borrower Printed Name   |  |

