SOUTHEAST MISSOURI STATE UNIVERSITY · 1873

/ STUDENT FINANCIAL SERVICES

# /2019-2020 Federal Direct Loan Adjustment Form

## STUDENT INFORMATION

Southeast ID #: S0_____

Student Name: _____ Phone Number: _____

***Complete either Section A or B***

## A) INCREASE LOAN (check all that apply)

☐ **Previously Rejected or Not Accepted**

☐ **Parent PLUS Denial:** Request for additional Unsubsidized Loan based on the denial of a PLUS Loan for this academic year.

☐ **Change in Grade Level:** Earned Credit hours – Freshman (0-29), Sophomore (30-59), Junior/Senior (60+)
- If the change in grade level occurred between the fall and spring semesters be sure to check "Spring Only"

**Loan Period Requested**:

☐ Fall and Spring ☐ Fall Only ☐ Spring Only ☐ Summer Only

**NOTE:** Indicate the amount of each type of loan being requested. If you are unsure of the amount and you desire the maximum you are eligible to receive enter "maximum" in the amount area.

$_____ Subsidized $_____ Unsubsidized

## B) DECREASE/CANCEL LOAN

**Loan Period Requested**:

☐ Fall and Spring ☐ Fall Only ☐ Spring Only ☐ Summer Only

**NOTE:** Indicate the amount of each type of loan to be decreased. If you would like to cancel the entire loan write "CANCEL" in the amount area.

$_____ Subsidized $_____ Unsubsidized $_____ Parent PLUS
*(Parent must sign this form)*

## SIGNATURE

I am authorizing Student Financial Services to make a change to my loan(s) as indicated above.

_____ _____
Student Signature *(Parent Signature if decreasing Parent PLUS Loan)* Date

FOR OFFICE USE ONLY:
T&C
SAP
Earned
Enrolled

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