

## Financial Aid Loan Adjustment Request

STUDENT ID	LAST NAME	FIRST NAME	PHONE NUMBER (w/area code)
<small>PRINT IN BLACK INK</small>			

**Please use this form to request adjustment to your financial aid loans.** Note that your request will be reviewed and handled as appropriate.

**Re-Offer or Increase Loan(s):** If you have declined or accepted a lower amount in your loan(s) and would like it re-offered, complete this section. NOTE: Loan(s) will be re-offered at the maximum eligibility, and you will be responsible for accepting the loan(s). You do not have to accept the whole amount; you can accept up to what was awarded.

- Federal Subsidized Loan**
- Federal Unsubsidized Loan**

**Decrease or Cancel:** If you have previously accepted a loan and you would like it decreased or cancelled, indicate here. NOTE: In some circumstances, we are unable to cancel or reduce your loan and you will need to work with your lender.

- Federal Subsidized Loan**
  - Loan should be cancelled for  Entire Year  Fall  Spring
  - Loan should be decreased to: \$\_\_\_\_\_ for  Entire Year  Fall  Spring
- Federal Unsubsidized Loan**
  - Loan should be cancelled for  Entire Year  Fall  Spring
  - Loan should be decreased to: \$\_\_\_\_\_ for  Entire Year  Fall  Spring

**Enrollment:** Please indicate your enrollment for the semesters listed.

- I will graduate in the following semester:**
  - Fall 2022
  - Spring 2023
  - I will not be graduating in Fall 2022 or Spring 2023
- I will not attend during the following semester(s):**
  - Fall 2022
  - Spring 2023
  - I will be attending both Fall 2022 and Spring 2023

**Student Certification:** You will need to certify this before we are able to proceed.

**Please Note: Changes to your financial aid awards may have an impact on your student account.**

*I understand that I am responsible for the repayment of my student loan(s) and any aid cancelled or reduced can only be re-instated at a later date, if the funds are still available. A request to change an award may result in a bill in which I am responsible for payment.*

\_\_\_\_\_ Date

**To submit this form:** you may drop it off at our windows in the Joyal Administration North Lobby, fax it to 559.278.4833, email it as an attachment to 5592784833@fax.csufresno.edu, or mail it to: Office of Financial Aid and Scholarships, 5150 North Maple Avenue - M/S JA64, Fresno, CA 93740-8026