

2016-2017
Direct Loan Change Request Form



Student Name: _____ **SSN:** _____

I would like additional Direct Stafford Loan funds for the following reason(s):

- _____ I am now in need of additional funds for educationally related expenses.
- _____ I am at a higher academic level.
- _____ My parent was turned down for a PLUS loan. I would like to accept the additional unsubsidized loan.

Please list the total amount of loan increase you are requesting: \$ _____

If you are not eligible for the loan amount requested in SUBSIDIZED loan funds, do you want your remaining request in UNSUBSIDIZED funds? Please note that unsubsidized loans accrue interest while in school.

Yes No

Please indicate the loan period that you are requesting this change in:

Fall	_____
Spring	_____
Summer	_____

Terms and Conditions

- I understand that any changes made to my loan(s) may result in 2-3 weeks processing time.
- I understand that if I drop below half time (6 hours) or completely withdraw from classes, I am required to complete Exit Loan counseling. Failure to complete this requirement now may delay future disbursements for terms in which I intend to enroll. I also understand that by withdrawing or dropping below half time that my 6 months loan repayment grace period may begin.

CANCEL MY LOAN

I would like to cancel the following loan disbursement(s). Please circle the appropriate term(s)

Subsidized Loan:	Fall	Spring	Summer
Unsubsidized Loan:	Fall	Spring	Summer

REDUCE MY LOAN

I would like to reduce my loan for the loan period indicated below:

Subsidized Loan:	Fall	Spring	Summer
Unsubsidized Loan:	Fall	Spring	Summer

Amount to Reduce: \$ _____

By signing this form, I authorize EGCC Financial Aid Office to make the changes that I have requested above. If I have requested a cancellation of a loan that has already been credited to my account, I understand that I am responsible for paying the balance owed to EGCC if a balance results from my request.

Student Signature (Required)

Date