

## Financial Aid Loan Adjustment Request

STUDENT ID	LAST NAME	FIRST NAME	PHONE NUMBER (w/area code)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PRINT IN BLACK INK

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 2020  
 Spring 2021  
 I will not be graduating in Fall 2020 or Spring 2021
- I will not attend during the following semester(s):**  
 Fall 2020  
 Spring 2021  
 I will be attending both Fall 2020 and Spring 2021

**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 reinstated 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.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**To submit this form:** you may fax it to 559.278.4833, email it as an attachment to 5592784833@fax.csufresno.edu or mail it to: The Office of Financial Aid and Scholarships, 5150 North Maple Avenue - M/S JA64, Fresno, CA 93740-8026