



INDIANA WESLEYAN UNIVERSITY

# 2025-2026 Loan Change Request Form

Student Name: \_\_\_\_\_

Student ID#: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

THIS FORM IS REQUIRED FOR CHANGES TO BE MADE TO YOUR STUDENT/PARENT LOANS. OUR OFFICE WILL CONTACT YOU IF WE HAVE ANY QUESTIONS ABOUT YOUR REQUEST.

Select all that apply:  Fall Semester  Spring Semester  Summer Term

### RETURN ENTIRE CREDIT BALANCE

I would like to return the entire amount of my credit balance. Please return to my:

- Subsidized Loan  Unsubsidized Loan  Grad Plus Loan
- Parent Plus Loan  Private Loan \_\_\_\_\_

### RETURN A SPECIFIC AMOUNT

I would like to return \$\_\_\_\_\_ to my:

- Subsidized Loan  Unsubsidized Loan  Grad Plus Loan
- Parent Plus Loan  Private Loan \_\_\_\_\_

### RETURN ENTIRE LOAN AMOUNT

I would like to return the entire amount of my (check all that apply):

- Subsidized Loan  Unsubsidized Loan  Grad Plus Loan
- Parent Plus Loan  Private Loan \_\_\_\_\_

Special requests: \_\_\_\_\_

*Your request will be processed within 10 business days.*

*Your balance may change; you must provide a plan to Student Account Services to pay any resulting balance. Failure to pay any resulting balance in a timely manner may result in a hold on your account which can affect your ability to register for classes.*

Borrower Signature: \_\_\_\_\_

Date: \_\_\_\_\_