



2026-2027 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: _____