Loan Request/Adjustment Form
2017-2018

For Office Use Only:
Initials: __________ Date: __________

Student’s Name_________________________ Student ID# _______________
Date _______________ Current Phone Number _______________________

1. I authorize Coastal Carolina University to: *Please select your request below.

   **Reduce** my:
   - Subsidized Direct Loan to total amount of $ ________________
   - Unsubsidized Direct Loan to total amount of $ ________________
   - Private Loan to total amount of $ ________________

   **************************** OR ****************************

   **Increase or Reinstate** my:
   - Subsidized Direct Loan to the total amount of $ ________________
   - Unsubsidized Direct Loan to the total Amount of $ ________________
   - My grade level has increased. I wish to increase my Direct Loan.

   **************************** OR ****************************

   My Parent was denied a Parent PLUS Loan and I wish to receive an additional Unsubsidized Direct Loan.

2. Apply adjustment to term:
   - Fall and Spring
   - Summer
   - Fall Only
   - Spring Only

   Please tell us why you are requesting a loan adjustment:
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

3. ___________________________________________ Date _______________

Signature

Fax form to 843-349-2347 or mail to: Financial Aid and Scholarships, 219 Baxley Hall, PO Box 261954 Conway SC 29528-0654