

## **FACPCF** Financial Aid and Scholarships PLUS Loan Adjustment/Cancel Form

2023-2024

dent's Name	SSN/ID#		
rent Name (Borrower)	SSNID#		
rent Email (Borrower)	Parent Borrower Phone #		
lease complete this form if you are requesting cha	anges to your 2023-2024 federal Parent PLUS loan.		
• Your requested loan amounts may be adjust regulations.	red based on your student's cost of attendance to comply with federal		
	acrease/reinstatement require the original credit decision to still be active (credit expires 180 days after ation). If your loan was approved with an endorser, you must apply for a new PLUS loan.		
	c year (fall and spring terms). If you would like to adjust your loan for one ne comments section below. If your request cannot be completed, Financial student for additional information.		
Any updates and adjustments can be viewed.	Any updates and adjustments can be viewed by your student in Self-Service.		
• Please allow 5-10 business days for process	Please allow 5-10 business days for processing. Processing may be longer during peak periods.		
Increase or Reinstate my Parent PLU  ***********************************	total amount of \$  ****** OR ****************************		
☐ Cancel my Parent PLUS loan			
<b>Comments</b> : (this section is not required unless	s you are requesting an adjustment for one term only)		
If your request above is for one term only, plea	ase specify the term: □ Fall □ Spring □ Summer		

## ature and Certification (digital signatures cannot be accepted):

By signing this form, I agree to all terms listed above. I understand that my loan(s) will be adjusted for the full academic year unless otherwise requested. I also understand that I and/or my student may be contacted for additional information if clarification is required or my request cannot be processed.

<b>Parent</b>	<b>Borrower</b>	<b>Signature</b>
---------------	-----------------	------------------

Date