

Financial Assistance 8600 University Boulevard Evansville, IN 47712 Phone: 812-464-1767 or 800-467

Phone: 812-464-1767 or 800-467-1965 Fax: 812-461-5305 / Email: finaid@usi.edu

Loan Adjustment Form 2024-2025

Direct/Parent Plus/Alternative

If you wish to adjust your original loan request, please complete this Loan Adjustment Form.

Note: Summer Direct loans & initial Parent Plus loans require a separate application. Students must contact their lender to initiate a Private/Alternative loan.

A. Student Information		
Student's full name:		
USI Student's ID#: / S	student's SSN (If ID is unknown):	<u>-</u>
B. Loan Adjustment Information		
1. Please indicate below if you are grad	duating in the Fall 2024 term.	
Yes No		
2. For what term are you wanting to a Please note: If no term is selected, yo		n fall and spring semesters.
Fall 2024 Spring 20	025 Fall 2024 and Spring 20	25
3. What loan type are you wanting to	adjust?	
Federal Direct Student Loan _	Federal Direct Plus Loan	Private/Alternative Loan
4. How much would you like to adjust	your loan by?	
	Decrease my loan by: tive Loan—you must contact your le	
5. In order to receive the maximum a	mount allowed, are you willing to a	ccept unsubsidized loan funds?
Yes No		
6. Was your parent denied a Direct Pa	arent PLUS loan?	
Yes No		
Special Instructions:		
C. Certification and Signature(s)		
By signing this form, you agree to allow the Fingour degrees completed and degree objectives		our 2024-2025 FAFSA, if necessary, as it relates to
Signature:		Date:
Parent Signature: (required for Parent PLUS Ad	justment)	Date: