

# 2017/2018 Federal Direct Unsubsidized Stafford LOAN REQUEST FORM



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

Mailbox #: \_\_\_\_\_

## INSTRUCTIONS

Complete all of the items below, sign, then submit your form to the Office of Financial Aid.

**STOP!** If your request is for a Graduate PLUS loan you must complete the Federal Graduate PLUS Loan Adjustment Form.

### 1. I am requesting the following (check one and provide a dollar amount):

- New loan for \$\_\_\_\_\_
- Increase my existing loan by a total of \$\_\_\_\_\_
- Decrease my existing loan by a total of \$\_\_\_\_\_
- Cancel my loan in full.

### 2. I want the loan adjustment for the following quarter(s)—check all that apply.

*Loan total listed above will be evenly split over the quarters you check.*

- Summer
- Fall
- Winter
- Spring

### 3. Read and acknowledge each of the following statements:

- I understand I must have a completed Master Promissory Note (MPN) on file with the U.S. Department of Education prior to submitting this loan adjustment request. Check MPN status at: [studentloans.gov](http://studentloans.gov).
- I understand an incomplete loan adjustment request form and/or missing requirements will result in my request being denied. All requirements must be complete prior to submitting a new request form.
- I understand I must complete all requirements and submit my completed form to the Office of Financial Aid by the following due date(s) in order for my request to be processed. *Late requests will not be processed until the following due date listed.*

7/1/2017 • 8/4/2017 • 9/15/2017 • 10/6/2017 • 11/3/2017 • 1/5/2018 • 2/2/2018 • 3/2/2018 • 4/6/2018 • 5/11/2018

## CERTIFICATION

I certify that I have requested this Stafford loan adjustment and all of the information is true to my knowledge. I understand it may take up to 7 business days, from the date(s) listed above, for any refund check(s) to be processed. I will use all student loan proceeds for authorized educational expenses only; and will immediately repay any funds that cannot be attributed to educational expenses while attending NUNM.

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

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

PLEASE MANUALLY SIGN THIS FORM. FORMS WITH ELECTRONIC OR TYPED SIGNATURES WILL BE RETURNED.

### OFFICE OF FINANCIAL AID USE ONLY

Completed    Denied   Notes: \_\_\_\_\_  
 EDE    A/L    ORIG/DRI    Sonis    DRI/DISb List   Initials: \_\_\_\_\_   Date: \_\_\_\_\_