

2024-2025 Federal Direct Unsubsidized Stafford LOAN REQUEST FORM



Name

Type of Request: New Loan Request Change from Previous Loan Request

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.
The 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 before submitting this loan adjustment request. Check MPN status at: studentaid.gov.
- I understand an incomplete loan adjustment request form and/or missing requirements will result in my request being denied. All requirements must be completed before 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) for my request to be processed. *Late requests will not be processed until the following due date listed.*

Fees

The U.S. Department of Education keeps a percentage of the loan you borrow. Historically, the fee has been 1%. However, this could change and will be determined in June 2024. For additional information, visit studentaid.gov.

07/05/24 08/02/24 09/06/24 10/04/24 11/01/24 11/29/24 01/03/25 02/07/25 03/07/25 04/04/25 05/02/25 06/06/25

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 7-10 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: _____

OFFICE OF FINANCIAL AID USE	
<input type="checkbox"/> Completed	Notes: _____
<input type="checkbox"/> EDE <input type="checkbox"/> A/L <input type="checkbox"/> ORIG/DRI <input type="checkbox"/> Sonis <input type="checkbox"/> DRI/DISb List	Initials: _____