Financial Aid Adjustment Form

Student’s Name ____________________________________________  ________,  ____________________________  ______,  __________

Last  First  M. I.

NJIT ID ______________________________________________  UCID E-mail ________________________________

Award Year ____________________________  ____________________________  
(e.g., 2017–2018, 2018–2019, etc.)  Telephone ____________________________

Please Cancel My: (check all that apply)  
[ ] Federal Work-Study (FWS)  
[ ] Federal Direct Unsubsidized Loan  
[ ] Federal Direct Subsidized Loan  
[ ] Federal Direct Parent PLUS Loan  
[ ] Federal Direct Graduate PLUS Loan  
[ ] Private Loan from ______________

Please Reinstate My: (check all that apply)  
[ ] Federal Work-Study (FWS)  
[ ] Federal Direct Unsubsidized Loan  
[ ] Federal Direct Subsidized Loan  
[ ] Federal Direct Parent PLUS Loan  
[ ] Federal Direct Graduate PLUS Loan  
[ ] Private Loan from ______________

Please Adjust My: (check all that apply)  New Amount For When (check all that apply)

[ ] Federal Direct Unsubsidized Loan $ ____________  _____ Academic Year _____ Fall Only _____ Spring Only
[ ] Federal Direct Subsidized Loan $ ____________  _____ Academic Year _____ Fall Only _____ Spring Only
[ ] Federal Direct Parent PLUS Loan $ ____________  _____ Academic Year _____ Fall Only _____ Spring Only
[ ] Federal Direct Graduate PLUS Loan $ ____________  _____ Academic Year _____ Fall Only _____ Spring Only
[ ] Private Loan from___________  $ ____________  _____ Academic Year _____ Fall Only _____ Spring Only

Other __________________________________________________________________________

NOTE: If you are requesting your entire federal loans to be processed for one semester or an uneven loan distribution between the Fall and Spring semesters, please explain below why you need your loan to be processed this way.

____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Student Signature  Date  Parent Signature (Required for Parent PLUS loan)  Date

Processed by: ____________________________________________  Date: _____________________