



**2023-2024 Student Loan
Adjustment Form**

Student's Name: _____ Student's ID #: _____
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Please check the box(s) that applies to your situation.

I would like my Direct Subsidized and/or Unsubsidized loans **REMOVED** from my account for:

- Fall 2023
- Spring 2024
- Summer 2024

I would like to **ADD** my Direct Subsidized and/or Unsubsidized loans to my account for:

Amount Needed:

- | | |
|--------------------------------------|----------|
| <input type="checkbox"/> Fall 2023 | \$ _____ |
| <input type="checkbox"/> Spring 2024 | \$ _____ |
| <input type="checkbox"/> Summer 2024 | \$ _____ |

If you are ineligible for the amount requested, you will be awarded your maximum eligibility.

Student's Signature Phone Number Date

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