125 Route 340

Sparkill, NY 10976

T: 845-398-4! * (F: 845-398-4" " % www.stac.edu

Loan Adjustment Form

Student Name:							
Date of Birth (mm/dd/yyyy): E-mail:							
FR	·		-,		ВА	GRAD ED	
Requesting Adjustment for Term(s)							
	Additional Loan		Amount \$				
Item	Request	Fall	Spring	Summer	Total Amt		
	I want the additional Undergraduate Unsubsidized Loan (up to \$2000)						
	Increases/Decreases	Amount \$					
Item	Request (choose item)	Fall	Spring	Summer	Revised Total Loan Amount (after increase/decrease)		
	I want to INCREASE / DECREASE						
	my Subsidized Loan by \$						
	I want to INCREASE / DECREASE						
	my Unsubsidized Loan by \$						
	I want to INCREASE / DECREASE my PLUS / GRAD PLUS Loan by \$						
	I want to INCREASE / DECREASE						
	my Private Loan by \$						
Comments/special circumstances:							
Cancellations							
Item				Fall	Spring	Summer	
	I want to CANCEL my Unsubsidized / Subsidized Direct Loan						
	I want to CANCEL my Parent PLUS / Grad PLUS Loan						
	I want to CANCEL my Private Loan						
Please complete, print, sign and MAIL or FAX to the address or fax number at the top of form.							
Student Signature: Parent Signature (required for Parent PLUS):				_Date:	Date: Date:		
ratem dignature prequired for ratem recojDate							