



Please submit this worksheet, and all applicable documents to: GSON Financial Aid Office 4483 Duncan Ave. St. Louis MO 63110 Fax: 314-362-2132

2023-2024 Federal PLUS Loan Adjustment Form

Student Name: _____ ID#: _____

Parent Name (if Parent PLUS loan): _____ Phone Number: _____

You may use this form to adjust your federal PLUS (Grad or Parent) loan. Please allow 3-5 business days for processing, and the student will receive an updated award letter in the mail after the revision has occurred. Funds are only able to be moved within an academic year, not across academic years.

Decrease
Decrease my PLUS Loan to a total of \$ _____
Please mark the applicable term and the new amount you wish the loan decreased to for that term:
Summer 2023: \$ _____ Fall 2023: \$ _____ Spring 2024: \$ _____

Cancellation
Cancel my PLUS loan for the future term(s) (select all that apply):
Summer 2023 Fall 2023 Spring 2024
Cancel my entire PLUS loan including previous disbursements. I understand that this may result in a balance on my or my student's account that will be my/our responsibility to re-pay.

If you are wanting to increase your PLUS loan, please login to studentaid.gov and select the option to "Change the application. You'll need your application number and enter the new total amount you wish to borrow. Otherwise you can also re-apply for the new amount with a new application.

If you are wanting to make an adjustment to a private alternative loan, please contact your Financial Aid Counselor directly for assistance.

Borrower Certification

I have completely read this form and understand the student is responsible for any balance owed as a result of the loan adjustment request. I understand non-payment of a balance will lead to holds on the student's account, which may also result in the student's inability to register for the next term, obtain an official transcript, or receive their diploma. Additionally, I understand non-payment of the balance for an extended time may result in the account being turned over to a credit bureau. I understand that purposely providing false or misleading information may result in being fined, sentenced to jail, or both. Lastly, I understand that the Financial Aid Office may not be able to satisfy my request due to federal regulations or limits.

Student Signature (Grad PLUS Loan change)

Date

Parent (Borrower) Signature (Parent PLUS Loan change)

Date