

## KINGSBOROUGH COMMUNITY COLLEGE \* DREAMS BEGIN HERE \*

## 2020-2021 Loan Adjustment Request Form

Name:					
	LAST NAME	FIRST NAME		MI	
D.O.B:					
	MM DD	YYYY		EMPLID	
Address:					
	NUMBER/STREET	APT#	CITY	STATE	ZIP
Phone:	()	Email:			
Please Note the College	: If the loan was disbur	sed and a refund was issue	d to you before you cance	el the loan, you ma	ny owe a balance to
	√ D	irect Subsidized Loan	**Direct Unsubsidized	d Loan**	
	I am requesting a	<b>DECREASE</b> of my Direct	Loan in the amount o	of: \$	
		☐ Fall	☐ Spring		
	I am requesting a <b>CAN</b>	NCELLATION* of my Direct I		\$	
ш	, ,		<u></u>		
		☐ Fall	☐ Spring		
(MPN); 2) that determine m Office has re information funds. 6) The may be redu	at I have completed Dire ny eligibility for Federal I ceived the results of my to be correct. 5) I must e Direct Loan amount ca ced at any time due to a	e below certifies that I under ect Loan Entrance Counseling Direct Loans. <b>4)</b> My Federal E 2020-2021 FAFSA, collected maintain half-time enrollmen nnot exceed my cost of atter a change in enrollment or fin oan to pay my remaining tui	g before submitting my req Direct Loan request cannot I all required documentation Int ( <b>6 credits</b> ) in order to recondance (COA) minus any ot Incial aid eligibility. <b>8)</b> The	uest. 3) The Financ be processed until on, and determined ceive any disbursen ther financial aid aw Bursars' Office will	ial Aid Office will the Financial Aid my application nent of Direct Loan varded. <b>7)</b> My loan make any necessary
Student's Sign	nature:		Date:		
Room U-201	! ncial Aid Kingsborough Co 368-4644/5651	mmunity College	Re	ceived by:	