

REQUEST FOR FINANCIAL AID REDUCTION

BORROWER SECTION	PLEASE PRINT ALL INFORMATION
Last name:	First Name:
Student ID#:	
Please choose one:	
☐ Reduce total amount of financial aid for the curr	ent award year to: \$
☐ Reduce financial aid to cover tuition and fees or	nly.
☐ Return funds to lender in the amount of: \$	
Borrower's Signature	Date
DO NOT WRITE BELOW THIS LINE	
FINANCIAL AID OFFICE SECTION	
Loans to Reduce: Original Total Reduced Total	Action Taken:
Direct Unsubsidized Loan: \$/	☐ Funds Returned (\$)
Direct Graduate PLUS: \$/	☐ Reduced 2 nd Disbursement (\$)
Other: \$/	□ Other:(\$
	Initial / Date: