



Request to Amend or Reject Loan

Please check only one Academic Year below

23/24

June Session **2023** to May Session **2024**
Summer Quarter **2023** to Spring Quarter **2024**

24/25

June Session **2024** to May Session **2025**
Summer Quarter **2024** to Spring Quarter **2025**

Name (Please Print): _____ Student ID #: _____

1. Loan Type: Subsidized Unsubsidized PLUS Private

I wish to: Reject Cancel Reduce* Reinstate* Request PLUS Request Private

*If you are requesting your loan to be reduced or reinstated please enter the updated amount you are requesting:

\$ _____ Per (Check One) Session or Quarter
OR for the Academic Year

2. For the following term(s):

College of Technologies:

June August October November
 January February March May

College of Business:

Summer Fall Winter Spring

I understand that by requesting my loan be cancelled or reduced, I am responsible to contact the Business Office and setup a satisfactory payment arrangement if there is any balance that may be owed.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

(PARENT BORROWER SIGNATURE REQUIRED IF PARENT LOAN DOLLAR AMOUNT IS BEING CHANGED)

Please fax or mail to the Office of Financial Aid: 1441 N. Cable Rd. Lima, OH 45805 Fax: 419-998-3191
If you need assistance, please call the Financial Aid Department at 419-998-8890