

2026-2027 Request for Federal Direct Loan Adjustment

Complete and return this form to the Office of Financial Aid in person or via email finaid@laroche.edu.

Last Name First Name Student ID

Current Address (include Apt. #) City State Zip Contact Number

Reason for your request for an adjustment to the Direct Loan(s):

☐ I previously accepted Federal Direct Loan funds for a lesser amount and wish to request additional loan funds, OR

☐ My Parent PLUS Loan was denied, and I wish to request the additional Unsubsidized Loan, OR

☐ I initially declined Federal Direct Loan funds for the current academic year and now wish to request loan funds, OR

☐ I want to cancel and/or reduce my current loan amount.

2026-2027 Academic Year: I wish to adjust Federal Direct Loan funds, in the following semester(s) (check all that apply):

| Semester | Requested Action | Loan Type | Current Amount | Adjustment Amount | Final Amount |
|--------------------------------------|-----------------------------------|---------------------------------------|----------------|-------------------|--------------|
| <input type="checkbox"/> Fall 2026 | <input type="checkbox"/> Increase | <input type="checkbox"/> Subsidized | | | |
| | <input type="checkbox"/> Decrease | <input type="checkbox"/> Unsubsidized | | | |
| | <input type="checkbox"/> Maximum | <input type="checkbox"/> PLUS Loan | | | |
| <input type="checkbox"/> Spring 2027 | <input type="checkbox"/> Increase | <input type="checkbox"/> Subsidized | | | |
| | <input type="checkbox"/> Decrease | <input type="checkbox"/> Unsubsidized | | | |
| | <input type="checkbox"/> Maximum | <input type="checkbox"/> PLUS Loan | | | |
| <input type="checkbox"/> Summer 2027 | <input type="checkbox"/> Increase | <input type="checkbox"/> Subsidized | | | |
| | <input type="checkbox"/> Decrease | <input type="checkbox"/> Unsubsidized | | | |
| | <input type="checkbox"/> Maximum | <input type="checkbox"/> PLUS Loan | | | |

I authorize La Roche University to certify the loan(s) I have requested on this Request for Federal Direct Loan Funds Form. I have read and understand the information contained in this form, and the information I have provided is accurate and complete. **Please be sure to submit this document with handwritten signatures.** Any typed signatures will not be considered as valid and may delay the processing of aid.

Student's Signature

Date

For Office Use Only

Received by: _____ Date: _____ ☐ Approved ☐ Denied ☐ Pending

Processed by: _____ Date Processed: _____