



Financial Aid Office
 Webb Institute
 298 Crescent Beach Road
 Glen Cove, NY 11542
 Phone: 516-403-5928 Fax: 516-674-9838
 Scan completed form and email to jwilson@webb.edu

2017-2018 FINANCIAL AID AWARD ADJUSTMENT REQUEST

Student Name: _____ **Class of** _____

Please Print

If reducing or cancelling a loan, this form must be submitted no later than 30 days after disbursement. **Note: Reducing or cancelling a loan after it has been disbursed may result in a balance on your account.** All amounts should be gross amounts before origination fees are removed.

CHECK ALL THAT APPLY:

Subsidized Direct Loan

- Cancel entire loan
- Reduce loan amount to: Fall \$ _____ Spring \$ _____

Unsubsidized Direct Loan

- Cancel entire loan
- Reduce loan amount to: Fall \$ _____ Spring \$ _____

Parent PLUS Loan

- Cancel entire loan
- Reduce loan amount to: Fall \$ _____ Spring \$ _____

Borrower Certification: I understand that:

- 1) I am applying for a loan that must be repaid to the U. S. Department of Education.
- 2) To receive my first loan, I must complete Entrance Counseling and sign a Master Promissory Note (MPN).
- 3) Interest on an Unsubsidized loan accrues while I am in school.
- 4) My loan may be reduced (or canceled), at any time due to additional financial aid or change in enrollment.

Signature:

Student/Parent _____ Date _____