

2024-2025 Parent Adjustment to Federal Direct Parent PLUS Loan

Student UCM ID _____

Student Full Name _____
First Name Last Name M.I.

Section A: Loan Adjustment Request

Use this form to request changes to your parent's Federal Direct PLUS loan. You will receive an e-mail to your UC Merced account once your request is processed. Typical processing time is 5-7 business days.

☐ Reinstate my Direct Parent PLUS Loan offer.

☐ I previously accepted part or all of my loan offer. ☐ Increase ☐ Decrease
by _____ for a new total of _____

- **Loan increase and reduction requests for loans that have not disbursed will be divided among your Fall & Spring terms.**
- **Requests to decrease a previously disbursed loan must be made within 90 days of the same loan being credited to your UC Merced account.**
- **Decreasing a previously disbursed loan may result in a balance owed on your UC Merced account. Balances that remain unpaid may result in adverse consequences including but not limited to: late fees, holds on registration, and transcripts.**

☐ Cancel a disbursement of my Federal Direct Parent PLUS loan. **Select the term:** ☐ Fall 2024 ☐ Spring 2025
We cannot return disbursed loans 90 days after the funds have credited to your account.

☐ Cancel my entire Federal Direct Parent PLUS loan.
This will cancel and return any loan funds that have disbursed. This may create a balance on your UC Merced billing account. Please be advised we cannot return disbursed loans 90 days after the funds have credited to your account.

☐ Decline my Federal Work Study (FWS) award offer and exchange it with Direct Parent PLUS Loan offer.
You must have an existing offer of FWS and have remaining Direct Loan eligibility. In addition, your FWS cannot be reduced if you have a FWS job and have already received paid amounts.

Section B: Student & Parent Certification

I hereby declare that all information reported on this document is true, complete, and accurate to the best of my knowledge. I understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal and/or repayment of financial aid and referral to the appropriate authorities.

Student Signature _____ Date _____ Parent Signature _____ Date _____

We cannot accept typed signatures. Please sign this form with drawn signatures.