STUDENT INFORMATION

<table>
<thead>
<tr>
<th>Last Name (Please Print)</th>
<th>First Name</th>
<th>Peralta Student ID</th>
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</thead>
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Complete the appropriate section as it applies.

**ADDITIONAL LOAN REQUEST (DIRECT STAFFORD LOANS ONLY)**
Loan increase requests are process based on maximum eligibility per semester.
Remember that there is a Stafford loan origination fee of 1%. Fees are taken off the total loan amount disburse to your student account.

Enter how much you want your loan increased by:

- ☐ Subsidized Stafford
  - Fall: $__________
  - Spring: $__________
- ☐ Unsubsidized Stafford
  - Fall: $__________
  - Spring: $__________
- ☐ If not eligible for the full subsidized loan amount request, I authorize that an unsubsidized loan be processed in its place

**LOAN REDUCTION REQUEST**
(Reduction will only be applied to undisbursed amounts or amounts disbursed within the last 120 days.)

Enter how much you want your loan reduced by:

- ☐ Subsidized Stafford
  - Fall: $__________
  - Spring: $__________
- ☐ Unsubsidized Stafford
  - Fall: $__________
  - Spring: $__________
- ☐ Parent PLUS
  - Fall: $__________
  - Spring: $__________
- ☐ Other** ______________________
  - Fall: $__________
  - Spring: $__________

**e.g. Health Professions, and Nursing Loans**

**LOAN CANCELLATION REQUEST**
Cancellation will only be applied to undisbursed amounts or amounts disbursed within the last 120 days.

- ☐ Subsidized Stafford
  - Fall: $__________
  - Spring: $__________
- ☐ Unsubsidized Stafford
  - Fall: $__________
  - Spring: $__________
- ☐ Parent PLUS
  - Fall: $__________
  - Spring: $__________
- ☐ Other** ______________________
  - Fall: $__________
  - Spring: $__________

**e.g. Health Professions, and Nursing Loans**

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Student Signature: ____________________ Date: ____________

Parent Borrower Signature (required for Parent PLUS Loan revisions) ____________ Date: ____________