

2026-2027 FEDERAL DIRECT PARENT/GRAD PLUS LOAN CHANGE REQUEST FORM

Please complete the following information detailing the loan adjustments you would like to make. You will receive a revised financial aid offer reflecting your updated loan amounts. If the loan change encompasses the entire 2026-2027 academic year, please be aware that all disbursements will be affected.

Before you complete this form, please read this carefully:

1. Loan Change Forms must be submitted no less than 30 days prior to the end of the term to allow for processing.
2. Any request to remove a semester will affect a student's remaining loan eligibility. Please note that removing a semester(s) does not guarantee increased loan amounts due to reducing the cost of attendance to reflect a shorter enrollment period.
3. Changes made to a Federal Parent PLUS Loan requires the signature of the parent borrower at all times.
4. If the Federal Parent/Grad PLUS Loan has an endorser, their signature is always required.
5. Adjusted amounts **do not** take origination fees into account. Please take this into consideration when calculating your changes.

FALL 2026☐ I will not be attending this semester☐ I would like to **decline** my loan for this semester☐ I would like to **maximize** my loan for this semester☐ I would like a **zero balance** for this semester☐ Adjust my loan to \$ for this semester**SPRING 2027**☐ I will not be attending this semester☐ I would like to **decline** my loan for this semester☐ I would like to **maximize** my loan for this semester☐ I would like a **zero balance** for this semester☐ Adjust my loan to \$ for this semester**SUMMER 2027**☐ I will not be attending this semester☐ I would like to **decline** my loan for this semester☐ I would like to **maximize** my loan for this semester☐ I would like a **zero balance** for this semester☐ Adjust my loan to \$ for this semester**Additional Instructions:**

By signing this form, I understand that my signature authorizes Liberty University Financial Aid Office to make the changes that I have requested above. For the purposes of Federal student aid, if I purposely give false or misleading information, I may be fined up to \$20,000, sent to prison, or both.

In addition, I acknowledge that a new credit check may be required in order to complete the changes requested above and that these changes may or may not be approved based on such credit check. I hereby authorize the U.S. Department of Education to investigate my credit history and report any applicable information about my loan status to persons or organizations permitted by law to receive such information. Liberty University and its agents cannot be held responsible for any loan changes required based on the results of this credit check.

Student Signature: _____

Email: _____

Parent Borrower Signature: _____

Date: _____

Endorser/Cosigner Signature (if applicable): _____

Anticipated Graduation Date: _____