INSTRUCTIONS:
Please complete the form allowing adjustments to the 2014-2015 Parent PLUS application.

A. STUDENT INFORMATION

Student Name: ________________________________  U ID Number: ________________________________

E-mail Address: ________________________________  Phone: ________________________________

B. CHANGE MY CREDIT DECISION OPTION TO: (check one)

- □ Obtain an endorser (co-signer)
- □ Request a credit Override
- □ Allow my son/daughter to obtain an unsubsidized loan up to their maximum eligibility at this institution.

C. INCREASE/DECREASE/CANCEL PARENT PLUS LOAN

Increase my existing Parent PLUS loan by $____________________________ for the

- □ Fall only
- □ Spring only
- □ Fall/Spring (amount will be divided evenly)
- □ Summer only

Decrease my existing Parent PLUS loan by $____________________________ for the

- □ Fall only
- □ Spring only
- □ Fall/Spring (amount will be divided evenly)
- □ Summer only

I request my Parent PLUS loan be cancelled.

- □ Fall only
- □ Spring only
- □ Fall/Spring
- □ Summer only

D. CERTIFICATION

Parent’s Name (print): ________________________________

Parent’s Phone: ________________________________

Parent’s Email: ________________________________

Parent’s Signature: ________________________________