

Loan Adjustment Form Academic Year 2023-24

Students are offered Federal Direct Loans as part of their overall financial aid package. Students may accept/decline all or part of these loans.

Please note declining these funds will not make you eligible for additional aid. Declining all or part of a loan that has already disbursed cannot occur until you repay the reduction to your student account.

Salem State University encourages students that must borrow to finance their education to utilize their entire Federal Direct Stafford Loans before borrowing private loans. Please select the changes to be made below:

Student Name: _____

ID Number: _____

Loan	Type of Adjustment	For Term(s)	Adjustment Amount	Total Loan Amount
Subsidized	<input type="radio"/> Accept <input type="radio"/> Decline/reduce <input type="radio"/> Increase <input type="radio"/> Reinstatement	<input type="radio"/> Fall/Spring <input type="radio"/> Fall Only <input type="radio"/> Spring Only	\$ _____	\$ _____
Unsubsidized	<input type="radio"/> Accept <input type="radio"/> Decline/reduce <input type="radio"/> Increase <input type="radio"/> Reinstatement	<input type="radio"/> Fall/Spring <input type="radio"/> Fall Only <input type="radio"/> Spring Only	\$ _____	\$ _____
Nursing	<input type="radio"/> Accept <input type="radio"/> Decline/reduce <input type="radio"/> Increase <input type="radio"/> Reinstatement	<input type="radio"/> Fall/Spring <input type="radio"/> Fall Only <input type="radio"/> Spring Only	\$ _____	\$ _____
MA No Interest Loan	<input type="radio"/> Accept <input type="radio"/> Decline/reduce <input type="radio"/> Increase <input type="radio"/> Reinstatement	<input type="radio"/> Fall/Spring <input type="radio"/> Fall Only <input type="radio"/> Spring Only	\$ _____	\$ _____
Comments:				

By signing below, I understand the following:

- If adjusting my loan results in a balance due, I am required to pay this balance from other sources.
- I may incur a late fee on any outstanding balance.
- I may be prohibited from registering for future semesters if I have an outstanding balance.

Student Signature: _____ Date: _____

Administrator Signature: _____ Date: _____