



DECREASE LOAN REQUEST FORM

STUDENT INFORMATION

Student Name _____		Student ID _____	Academic Year _____
Student Address (Street) _____	(City) _____	(State) _____	(Zip Code) _____
Student Rowan Email _____	Student Phone Number _____		

REQUESTED DECREASE

I am requesting CMSRU Financial Aid Services to process my request to decrease my funding as indicated:

Loan Type (select one*):

- Federal Unsubsidized Direct Loan
- Federal Graduate PLUS Direct Loan
- Private/Alternative Education Loan

Current Total Loan Amount** \$ _____

Requested Amount to Decrease - \$ _____

New Total Loan Amount \$ _____

***If you wish to decrease funding on multiple loans, you must submit a separate form for each loan.**

**** Information about your Financial Aid Offer can be found by logging into [Rowan Self-Service](#).**

Student Signature _____	Date (mm/dd/yyyy) _____
-------------------------	-------------------------

CMSRU FINANCIAL AID SERVICES USE ONLY

Loan Type:

- Federal Unsubsidized Direct Loan
- Federal Graduate PLUS Direct Loan
- Private/Alternative Education Loan

Prior Loan Amount \$ _____

Decrease Request Amount - \$ _____

New Total Loan Amount \$ _____

Processed By _____	Date (mm/dd/yyyy) _____
<small>Financial Aid Representative</small>	