

**INDIANA UNIVERISTY NORTHWEST
OFFICE OF THE BURSAR
LOAN CANCELLATION FORM**

I understand that I have the right to cancel or reduce my federal student loan(s). I wish to exercise this right as noted below.

NOTE: Only the borrower of the loan may request a change. For example a parent may not adjust a Stafford loan because the student is the borrower, not the parent.

Stafford Subsidized ____ Stafford Unsubsidized* ____ PLUS ____ Perkins ____
*Unsubsidized loans will be adjusted before any changes to subsidized loans are made.

For the period:

First Semester** ____ Second Semester ____

First Summer Session ____ Second Summer Session ____

**Canceling the first disbursement of a loan will automatically cancel the second disbursement.

Please:

Cancel my Loan ____ *Reduce my loan to \$ _____

*PLUS borrowers – reduce loan to gross amount

Important Information:

- This request must be in compliance with the information provided on the Federal Loan Borrower/PLUS loan notification.
- If this cancellation/reduction leaves an unpaid balance on your Bursar account, you must pay that balance with personal funds to avoid late payment fees and other institutional penalties.
- The Office of Financial Aid and Scholarships may adjust a subsequent loan disbursement, if the first disbursement has already credited to your account.

____ * I have read and understand the above information. (check required to process adjustment request.)

Borrower Name _____ *

Student Name _____ *
(if different from borrower name)

University ID Number _____ *

Last 4 digits of PLUS borrower SSN _____ *
(if requesting a PLUS loan adjustment)

E-mail Address _____ *

Daytime Phone Number _____

* Required Field