

UNIVERSITY OF NEW MEXICO  
OFFICE OF STUDENT FINANCIAL AID  
LOAN CHANGE REQUEST FORM

Student's Printed Name	UNM ID No.
Telephone No.	Email Address

PLEASE RETURN THIS FORM TO THE FINANCIAL AID OFFICE AT THE UNM CAMPUS YOU ARE ATTENDING.

**IMPORTANT!** If you wish to reduce or cancel your FFELP Loan(s), you must notify our office within 14 days after your loan funds credit your UNM account.

If you wish to CANCEL one or more of your loans, please circle:

Please <b>CANCEL</b> my <b>Subsidized</b> FFELP Loan	Please <b>CANCEL</b> my <b>Unsubsidized</b> FFELP Loan	Please <b>CANCEL</b> my <b>Grad/Professional PLUS</b> Loan
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If you wish to REDUCE one or more of your loans, complete this section:

Please <b>REDUCE</b> my <u>Subsidized</u> FFELP Loan to \$	Please <b>REDUCE</b> my <u>Unsubsidized</u> FFELP Loan to \$	Please <b>REDUCE</b> my <u>Grad PLUS</u> Loan to \$
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If you wish to INCREASE one or more of your loans, complete this section:

Please <b>INCREASE</b> my <u>Subsidized</u> FFELP Loan to \$	Please <b>INCREASE</b> my <u>Unsubsidized</u> FFELP Loan to \$	Please <b>INCREASE</b> my <u>Grad PLUS</u> Loan to \$
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If you wish to CHANGE your loan period, complete this section:

Please <b>CHANGE</b> my <u>Subsidized</u> FFELP Loan period to: <u>FROM</u> Month                  Year ----- <u>TO</u> Month                  Year -----	Please <b>CHANGE</b> my <u>Unsubsidized</u> FFELP Loan period to: <u>FROM</u> Month                  Year ----- <u>TO</u> Month                  Year -----	Please <b>CHANGE</b> my <u>Grad PLUS</u> Loan period to: <u>FROM</u> Month                  Year ----- <u>TO</u> Month                  Year -----
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Student's Signature	Date Signed

The University of New Mexico is an Equal Opportunity/Affirmative Action institution. Pursuant to the Americans with Disabilities Act, if you require this information in alternative format or have special needs, please contact the Office of Student Financial Aid for assistance.