UNIVERSITY OF SOUTH CAROLINA AIKEN

Office of Financial Aid
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803-641-3476 • Fax 803-643-6840
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2018-2019 FINANCIAL AID ADJUSTMENT FORM

_____ _____ **OR** _____
STUDENT'S NAME USCA ID My VIP ID

Please complete all applicable sections below, SIGN, date and return to the USC Aiken Office of Financial Aid.

Please indicate the term you wish to make changes (all students must complete this section):					
☐ Fall	☐ Spring	☐ Fall / Spring	☐ Maymester	☐ Summer I	☐ Summer II

CANCELLATION REQUEST

☐ I wish to cancel all of my financial aid (including grants and scholarship funds).
please note these funds may no longer be available due to funding limitations
☐ I wish to cancel all of my Federal Direct Loans.
☐ I wish to cancel my Subsidized Federal Loan.
☐ I wish to cancel my Unsubsidized Federal Loan.
☐ I wish to cancel my Perkins Loan.
☐ I wish to cancel my PLUS Federal Direct Loan.
☐ I wish to cancel my Private Alternative Loan.

IMPORTANT NOTE TO ALL LOAN RECIPIENTS: If you received Federal Direct Loan proceeds during your enrollment at USC Aiken, you **must** complete Loan Exit Counseling when you withdraw, graduate or drop below half-time (6 credit hours) attendance. This process can be completed online at www.nslds.ed.gov. Select 'Exit Counseling' on main screen and follow the instructions to complete your exit counseling. USC Aiken will receive an electronic confirmation upon completion of the exit counseling session.

REINSTATEMENT REQUEST

☐ I wish to reinstate all of my financial aid (including grants and scholarship funds).
please note these funds may no longer be available due to funding limitations

☐ I wish to reinstate my federal direct loan(s) for the amount listed below:
Subsidized $_____ Unsubsidized $_____ PLUS $ _____

LOAN ADJUSTMENT REQUEST

☐ I am graduating in December. Please process my loan for the Fall term only. I understand that my loan amount will be prorated based on enrollment for one term.

☐ I wish to apply for $ _____in additional Federal Direct Loan(s) due to grade level change. My grade level is now: ☐ Sophomore ☐ Junior ☐ Graduate

☐ My parent was denied a PLUS loan. I wish to apply for $ _____in additional Unsubsidized funds.

☐ I wish to make the following change(s):

	Subsidized Loan	Unsubsidized Loan	Private/Alternative Loan
Increase By			**N/A**
Decrease By	**N/A**	**N/A**	

My signature below authorizes the USC Aiken Office of Financial Aid to make the above changes. I understand that if I have requested a cancellation of a loan that has been disbursed to my account, I am responsible for paying the balance due to USC Aiken.

_____ _____
Student's Signature Date