

**AWARD ADJUSTMENT REQUEST  
2019-2020**

Student's Name \_\_\_\_\_ Student's ID # \_\_\_\_\_  
(Please Print)

**Accepting:**      ☐ All Year                      ☐ Fall Only                      ☐ Spring Only

Subsidized Loan: \$ \_\_\_\_\_  
Unsubsidized Loan: \$ \_\_\_\_\_  
Parent PLUS Loan: \$ \_\_\_\_\_  
Alternative Loan: \$ \_\_\_\_\_  
Other: \_\_\_\_\_ \$ \_\_\_\_\_

**Reduce or Decline** (please circle):                      ☐ All Year                      ☐ Fall Only                      ☐ Spring Only

(If you Decline your loans, please proceed to **STEP FOUR**)

Subsidized Loan: \$ \_\_\_\_\_ to \$ \_\_\_\_\_  
Unsubsidized Loan: \$ \_\_\_\_\_ to \$ \_\_\_\_\_  
Parent PLUS Loan: \$ \_\_\_\_\_ to \$ \_\_\_\_\_  
Alternative Loan: \$ \_\_\_\_\_ to \$ \_\_\_\_\_  
Other: \_\_\_\_\_ \$ \_\_\_\_\_ to \$ \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

*Loan(s) will not be processed until **ALL** steps have been completed:*

Loan Entrance Counseling @ <https://studentloans.gov>

Master Promissory Note @ <https://studentloans.gov>

Parent PLUS Loan Entrance Counseling @ <https://studentloans.gov>

Parent PLUS Loan Master Promissory Note @ <https://studentloans.gov>

Please complete and return this form to:

McKendree University  
Office of Financial Aid  
701 College Road  
Lebanon, IL 62254  
Telephone: 618.537.6828    FAX: 618.537.6530