Supplemental Financial Aid Information

result in a tuition liability.

Student Name: ______ CWID:______ I am requesting this for: ______ Academic Year _____ Fall & Spring _____ Fall only _____ Spring only _____ Summer Cancel entire loan _____ Decrease loan I am requesting a net decrease in the Direct PLUS Loan in the amount of: \$ ______ New loan total will be: \$ ______ (Net amount after loan fees) The Office of Student Financial Services will decrease/cancel the Direct PLUS loan according to what is indicated above. A revised award notification will be sent to the student's Marist email account once the

cancellation/decrease has been completed. A decrease/cancellation of all or a portion of the loan may

Date: _____

Date:

Print Parent Name

Parent Signature _____

Student Signature _____