

Student Name _____

NET ID _____

Federal Direct Unsubsidized Loan – Please check the semester and loan change type

☐ Summer 2026 ☐ Fall 2026 ☐ Spring 2027 ☐ Academic year (split evenly between all semesters)

☐ Reduce my unsubsidized loan by the following amount \$ _____

☐ Increase my unsubsidized loan by the following amount \$ _____

☐ Cancel my unsubsidized loan entirely

☐ Other (please explain in detail what you wish to do) _____

Federal Direct Grad PLUS – Please check the semester and loan change type

☐ Summer 2026 ☐ Fall 2026 ☐ Spring 2027 ☐ Academic year (split evenly between all semesters)

☐ Reduce my Grad PLUS loan by the following amount \$ _____

☐ Increase my Grad PLUS loan by the following amount \$ _____

☐ Cancel my Grad PLUS loan entirely

☐ Other (please explain in detail what you wish to do) _____

Alternative Loan – Please check the semester and loan change type

☐ Summer 2026 ☐ Fall 2026 ☐ Spring 2027 ☐ Academic year (split evenly between all semesters)

☐ Reduce my alternative loan to the following amount \$ _____

☐ Cancel my alternative loan entirely

By signing this form, I authorize the Creighton University Financial Aid Office to make the changes that I have requested above. If I have requested a cancellation of a loan that has already credited to my account, I understand that if a balance results from my request, I AM responsible for paying the balance owed. You must be enrolled at least half-time to be eligible for a federal loan. In accordance with federal guidelines, Creighton University may not originate a federal loan for a period in the academic year in which the student is no longer enrolled. Requests must be made within the academic year.

Student Signature

Date