

# 2023-2024 Request for Change to Financial Aid

**Student ID Number or Social Security Number:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
(Last) (First) (Middle)

Please check which statement best represents your request:

- Reduce my loan to:
  - Circle the Loan Type:      SUBSIDIZED      UNSUBSIDIZED
  - Fall 2023 Amount: \$ \_\_\_\_\_
  - Spring 2024 Amount: \$ \_\_\_\_\_
  - Summer 2024 Amount: \$ \_\_\_\_\_
- Increase my loan to:
  - Maximum Eligibility
  - Requested increase amount:
    - Fall 2023 Amount: \$ \_\_\_\_\_
    - Spring 2024 Amount: \$ \_\_\_\_\_
    - Summer 2024 Amount: \$ \_\_\_\_\_
- Cancel the second half of my loan:
  - Circle the Loan Type:      SUBSIDIZED      UNSUBSIDIZED
  - Circle the Semester:      FALL      SPRING      SUMMER
- Cancel my financial aid at NIC:
  - Circle the Semester:      FALL      SPRING      SUMMER
- Other, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**By checking this statement and signing this form, I authorize the NIC Financial Aid Office to make the requested changes on my behalf by accepting, reducing, or canceling my loan and/or other financial aid funding.**

**STUDENT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_