

2018-19 Federal Loan Adjustment Form



Student Name: _____ Student CWID: _____

Class of 20_____ Degree Program: MD PA Other MS MS/EMBA

For Masters specify program: _____

1300 York Avenue
Room C-114
New York, NY 10065
T: 646.962.3479
F: 212.746.5981

Federal Direct Unsubsidized Loan - **Increase/Replace Contribution/Budget Increase:**

I would like to borrow a Federal Direct Unsubsidized loan in the additional amount of \$_____.

Federal Direct Graduate PLUS Loan - **Increase/Replace Contribution/Budget Increase:**

I would like to borrow a Federal Graduate PLUS loan in the additional amount of \$_____.

Check if you would like to include loan fees to the amount(s) above.

Loan Fees: Unsub Loan - 1.062% Grad Plus Loan - 4.248%

Federal Loan Limits:

Direct **Graduate PLUS** loan cannot exceed your budget minus all other aid.

Direct **Unsubsidized** loan amount cannot exceed the following amounts per academic year:

- MD Students Years 1 & 2: \$42,722
- MD Students Year 3: \$47,167
- MD Students Year 4: \$44,944
- Masters Students: \$20,500

Reduction/Cancellation request for Federal Direct Unsubsidized/Graduate PLUS Loan:

I would like to reduce/cancel my loan(s) by the amount of \$_____.

(Loan reductions and cancellations are honored in the following order: Grad PLUS first, Unsubsidized loan(s) second.)

I understand that any changes requested post-disbursement of original funds might result in a balance due on my student accounting bill.

STUDENT'S SIGNATURE

DATE

Return completed form to the Office of Financial Aid, 1300 York Avenue, C-114
or email to: finaid@med.cornell.edu