2016-2017 Academic Year Aid Adjustment Form

Student Printed Name ___________________________ UI Student ID # ___________________________

Cancelling/Reducing Your Financial Aid

View the website http://financialaid.uiowa.edu/receivingfunds/notification before completing this section.

☐ I will not be attending the University of Iowa; therefore, I am declining all of my 2016-2017 financial aid. (You must directly inform other University departments of your plans.)

Federal Direct Stafford Loan
☐ decline the entire 2016-2017 amount
☐ reduce Fall 2016 to a total of $_________
☐ reduce Spring 2017 to a total of $_________

Federal Direct Unsubsidized Stafford Loan
☐ decline the entire 2016-2017 amount
☐ reduce Fall 2016 to a total of $_________
☐ reduce Spring 2017 to a total of $_________

Federal Perkins Loan
☐ decline the entire 2016-2017 amount
☐ reduce Fall 2016 to a total of $_________
☐ reduce Spring 2017 to a total of $_________

Federal Direct Unsubsidized Stafford Loan for Health Professions
☐ decline the entire 2016-2017 amount
☐ reduce Fall 2016 to a total of $_________
☐ reduce Spring 2017 to a total of $_________

Parent PLUS Loan (for parents of dependent students)
☐ decline the entire 2016-2017 amount
If the loan has been requested or loan funds have disbursed, a parent signature is required below.
If borrowing a parent PLUS Loan, each year the parent borrower must print and complete the Request for PLUS loan form at http://financialaid.uiowa.edu/forms.
The parent will indicate the amount they want to borrow on that form.

Federal Nursing Loan/Federal Health Professions Loan (circle one)
☐ decline the entire 2016-2017 amount
☐ reduce Fall 2016 to a total of $_________
☐ reduce Spring 2017 to a total of $_________

Graduate PLUS Loan (for graduate students)
☐ decline the entire 2016-2017 amount
☐ reduce Fall 2016 to a total of $_________
☐ reduce Spring 2017 to a total of $_________

Work-Study
☐ decline the entire 2016-2017 amount
☐ reduce Fall 2016 to a total of $_________ (the minimum Work-Study amount is $500 per semester)
☐ reduce Spring 2017 to a total of $_________ (the minimum Work-Study amount is $500 per semester)
☐ do not increase my loans
☐ increase my loans (If you have been awarded the annual maximum for your student loans, your loans cannot be increased. See http://financialaid.uiowa.edu/receivingfunds/notification.)

☐ My request is not listed above (specify change): __________________________________________________________________

Parent Signature ___________________________ Date ______________
(Required only if declining Parent PLUS that has already been requested or disbursed)

Additional Financial Aid You Expect To Receive That Is Not Awarded By the UI Office of Student Financial Aid

Assistance you receive from other sources may affect your financial aid. List any scholarships, tuition assistance, grants, educational loans, monetary awards, vocational rehabilitation funds, scholarships from assistantships, fellowships or traineeships, or any other educational benefits that you expect to receive from your academic department and/or an outside agency that are not already listed on your award notification.

<table>
<thead>
<tr>
<th>Complete Name of Award</th>
<th>Name of UI Department or Granting Agency</th>
<th>Award Amount (I.e., fall, spring, academic year)</th>
</tr>
</thead>
</table>
| ______________________ | ______________________ | __________________________ | $_________________ | $_________________
| ______________________ | ______________________ | __________________________ |

If you receive a non-University of Iowa scholarship check, submit the check to the University of Iowa Office of Student Financial Aid. The funds will be applied to your University Bill. Refer to the Submitting Scholarship Checks information sheet for details.

Student Signature ___________________________ Date ______________

Parent Signature ___________________________ Date ______________
(Required only if declining Parent PLUS that has already been requested or disbursed)