2018-2019 Academic Year Aid Adjustment Form

Student Printed Name ___________________________________________ UI Student ID # _________________________________

Office of Student Financial Aid
208 Calvin Hall
Iowa City, IA 52242-1315
(319) 335-1450 (319) 335-3060 (fax)
e-mail: financial-aid@uiowa.edu
http://financialaid.uiowa.edu

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.

Complete Name of Award ___________________________ Name of UI Department or Granting Agency ___________________________
Award Amount $ ___________________________ Award Period (i.e., fall, spring, academic year) ___________________________

If you receive a outside scholarship check, submit the check to the University of Iowa Billing Office (https://ubill.fo.uiowa.edu). The funds will be applied to your University Bill. Refer to their Submitting Scholarship Checks web page for details.

Student Signature ___________________________________________ Date ________________

Parent Signature ___________________________________________ Date ________________

(Required only if declining Parent PLUS that has already been requested or disbursed)

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 2018-2019 financial aid. (You must directly inform other University departments of your plans.)

☐ Federal Direct Stafford Loan
  ☐ decline the entire 2018-2019 amount
  ☐ reduce Fall 2018 to a total of $ _________
  ☐ reduce Spring 2019 to a total of $ _________

☐ Federal Direct Unsubsidized Stafford Loan
  ☐ decline the entire 2018-2019 amount
  ☐ reduce Fall 2018 to a total of $ _________
  ☐ reduce Spring 2019 to a total of $ _________

☐ Graduate PLUS Loan (for graduate students)
  ☐ decline the entire 2018-2019 amount
  ☐ reduce Fall 2018 to a total of $ _________
  ☐ reduce Spring 2019 to a total of $ _________

☐ Federal Direct Unsubsidized Stafford Loan for Health Professions
  ☐ decline the entire 2018-2019 amount
  ☐ reduce Fall 2018 to a total of $ _________
  ☐ reduce Spring 2019 to a total of $ _________

☐ Federal Nursing Loan/Federal Health Professions Loan (circle one)
  ☐ decline the entire 2018-2019 amount
  ☐ reduce Fall 2018 to a total of $ _________
  ☐ reduce Spring 2019 to a total of $ _________

☐ Parent PLUS Loan (for parents of dependent students)
  ☐ decline the entire 2018-2019 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 semester the parent borrower must complete the PLUS Loan Application at studentloans.gov. The parent will indicate the amount they want to borrow on that application.

☐ Work-Study
  ☐ decline the entire 2018-2019 amount
  ☐ reduce Fall 2018 to a total of $ _________ (the minimum Work-Study amount is $500 per semester)
  ☐ reduce Spring 2019 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): ___________________________________________

☐ I will not be attending the University of Iowa; therefore, I am declining all of my 2018-2019 financial aid. (You must directly inform other University departments of your plans.)

☐ Fall 2018
☐ Spring 2019

Federal Nursing Loan/Federal Health Professions Loan (circle one)