



Financial Aid Change Request Form  
2026-2027

Students Name: \_\_\_\_\_ Student ID: @\_\_\_\_\_

By submitting this request and signing below I acknowledge that I understand the following:

- Curry College will decline the unsubsidized loan portion first as it begins to accrue interest at the time of disbursement.
- Loan declines and reductions may take up to 7 business days to be reflected on the portal.
- I must submit a written request to your office if I want to have the loan(s) reinstated. If I am declining/reducing my loan near or after the end of a semester, I understand that action may be permanent and there is no guarantee of reinstatement.

Request to decline or reduce your loan by checking the appropriate boxes below.

**Request to DECLINE Direct Loan**

I wish to:

- |  |  |
|--|--|
| <input type="checkbox"/> decline my <b>Fall</b> 2026 Direct Loan   | <input type="checkbox"/> decline my <b>Summer</b> 2027 Direct Loan |
| <input type="checkbox"/> Subsidized                                | <input type="checkbox"/> Subsidized                                |
| <input type="checkbox"/> Unsubsidized                              | <input type="checkbox"/> Unsubsidized                              |
| <br>   |  |
| <input type="checkbox"/> decline my <b>Spring</b> 2027 Direct Loan |  |
| <input type="checkbox"/> Subsidized                                |  |
| <input type="checkbox"/> Unsubsidized                              |  |

**Request to REDUCE Direct Loan**

I wish to:

- |  |                           |
|--|---------------------------|
| <input type="checkbox"/> reduce my loan amount                           |                           |
| <input type="checkbox"/> <b>Fall</b> semester original amount \$ _____   | to new amount of \$ _____ |
| <input type="checkbox"/> <b>Spring</b> semester original amount \$ _____ | to new amount of \$ _____ |
| <input type="checkbox"/> <b>Summer</b> semester original amount \$ _____ | to new amount of \$ _____ |

**Request to Decline Massachusetts No Interest Loan and/or Change Federal Work Study**

- |  |
|--|
| <input type="checkbox"/> I request to <b>decline</b> my Massachusetts No Interest Loan           |
| <input type="checkbox"/> I request to <b>decline</b> Federal Work Study                          |
| <input type="checkbox"/> I request to <b>reduce</b> Federal Work Study from \$ _____ to \$ _____ |

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date: \_\_\_\_\_ Staff Initials \_\_\_\_\_