

**2008-2009
LOAN REQUEST CHANGE FORM**

NAME _____

SOCIAL SECURITY NUMBER _____

E-MAIL ADDRESS _____

TELEPHONE NUMBERS:

HOME _____ WORK _____ CELL _____

REDUCED LOAN AMOUNT:

____ REDUCE MY ANNUAL SUBSIDIZED LOAN TO \$ _____

____ REDUCE MY ANNUAL UNSUBSIDIZED LOAN TO \$ _____

____ CANCEL MY ANNUAL UNSUBSIDIZED LOAN IN FULL.

Please remember this student loan is your debt and must be repaid. You may repay your loan at any time without penalty. You must keep your lender informed of any changes in your address and enrollment status in school.

As a reminder, failure to repay your loan according to its terms and conditions will result in reporting your default to a National Credit Bureau and may result in the loss of your good credit rating, legal action, and wage garnishment.

I HAVE READ AND FULLY UNDERSTAND ALL OF THE ABOVE INFORMATION:

SIGNATURE _____

DATE _____

**Sincerely,
Office of Financial Aid
Lindenwood University
636-949-4923**

