



2019-2020 REQUEST TO REDUCE LOAN

STUDENT'S NAME & ADDRESS (please print clearly)

STUDENT'S BANNER ID # (required)

PHONE _____

Are you a Graduate or Undergraduate Student?

By signing below, I understand that I am asking the Samford University One Stop to **REDUCE** the loan(s) indicated below. I also understand that the Samford University One Stop will not return these funds after the established return date*. After that time, I understand that it is the borrower's responsibility to return the funds.

Student Signature: _____ Date: _____

***Return Policy:** Federal loans can be reduced through Samford University until October 31st (fall) and March 31st (spring). Private loans can be reduced up to 30 days after disbursement.

LOAN TYPE TO REDUCE	TERMS			Student Financial Services use only. Please do not write in the columns below.		
	Please indicate the GROSS amount you would like to have reduced.			Gross Amount	Net Amount Returned	Notes
	FALL 2019	SPRING 2020	SUMMER 2020			
SUBSIDIZED & UNSUBSIDIZED DIRECT LOAN						
SUBSIDIZED DIRECT LOAN						
UNSUBSIDIZED DIRECT LOAN						
PARENT PLUS LOAN						
GRADUATE PLUS LOAN						
PRIVATE LOAN						
HEALTH PROFESSIONS LOAN						
CIOS LOAN						
COHRON LOAN						

Student Financial Services Use Only:

YOUR LOAN CANNOT BE REDUCED because _____

YOUR LOAN(S) WAS REDUCED on _____ (date) by _____

**Samford University
 Student Financial Services**

800 Lakeshore Drive, Birmingham, AL 35229 | Phone: (205) 726.2905 | Fax: (205) 726.2738 | Email: onestop@samford.edu