

Mail:

LMU Financial Aid Office

1 LMU Drive, Suite 270

Los Angeles, CA 90045

## **Summer 2025 Undergraduate Financial Aid Revision Request Form**

Student Nam	e		LMU ID:		
Please use this see Please note that of Session 1 and Ses	OAN REVISIONS: Please ction to request changes to the origination fees will be deducte sion 2 will have their total loan fore the end of the term you are	e principal amount for your Fed d from the principal amount on a amount for the summer disbu	deral Direct Loan, Parent PLUS I f Federal Direct and PLUS Loan ursed evenly between both sur	Loan or Alternative (I ns. Students enrolled	Private) student loan(s). in both Summer
	ase my Parent PLUS to the n I loan borrowers must apply				
I would like	to revise the principal am	ount of my	from \$	to \$	
My parent w	vas denied a Parent PLUS L	oan. Please award me an	additional Direct Unsubsi	dized Loan of \$	
WORK STUD	Y REVISIONS:				
Please consi	der me for a work study awa	ard 🔲 I would like to cha	nge my work study award f	rom \$	to\$
ENROLLMEN	IT CHANGES, HOUSING	G OR GRADE LEVEL RE	EVISIONS: Indicate the se	ssion(s) and the ch	ange(s) below.
Enrollment:	() I will be enrolled in	units for Summ	ner session l	units for Sumr	ner session II
Housing:		 .iving off campus (w/parent	:s) Cliving off campus (ne	— ot w/parents)	
Grade Level:	OI will be a sophomore (30		○ I will be a junior or Senior		units)
I certify that I an understand that Endorser will be	n the borrower of the loan list requesting an increase to not required to complete a new to be before my loan increase ca	sted above. I understand th ny PLUS loan is subject to a v Endorser Addendum and	at aid can be offered or adju credit check. I understand t	usted only if eligibi hat if my loan requ	ility exists. I uires an Endorser, the
Student Signat	ture		Date		
<b>NOTE:</b> If you are below.	requesting an increase to y	rour Parent PLUS loan for su	ımmer the <u>Parent borrowe</u>	r must complete	- <b>and sign</b> the section
Parent Name			Parent email		
Parent Signatu	ire		Date		_
		How to Submit	this Form:		
Phone: 310.33 Fax: 310.33	38.2753 38.2793	The Department of Educat documents containing per information (PII) must be to means. This form cannot b	sonally identifiable ransmitted through secure	For Office Use Only: RRAAREQ - SRVREQ Nolij - Summer Revi	@ C, second block @R

may mail or fax this form to the address or fax

financialaid.lmu.edu/upload

number listed to the left, or you may submit it as a

PDF through our Secure Upload page available at

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