

**VILLANOVA UNIVERSITY SCHOOL OF LAW**  
**Office of Financial Aid**

Please remember to **SIGN** and return this form to the Villanova Law School Office of Financial Aid.

Fax: 610-519-6597 OR Scan and Email: [finaid@law.villanova.edu](mailto:finaid@law.villanova.edu) OR Mail: 299 N. Spring Mill Road, Villanova, PA 19085

**FEDERAL DIRECT STAFFORD LOAN CHANGE FORM**

**Note: Fees are deducted from each loan borrowed prior to disbursement. For the Stafford Loan the total amount of fees deducted is 1.068%. (Please refer to the Loan Description section on our website for more details regarding fees.) Therefore, the amount you receive (net amount) will be less than the amount you request (gross amount). When completing this form please indicate the gross amount you wish to change.**

**To increase this loan:**

**GROSS AMOUNT**  
(prior to fees being deducted)

\_\_\_\_\_ I wish to **increase** my loan as follows:

Total amount previously requested

\$ \_\_\_\_\_

Additional amount requested

+\$ \_\_\_\_\_

**Total amount requested for academic year 20** \_\_\_\_\_

**= \$** \_\_\_\_\_

**To decrease this loan:**

\_\_\_\_\_ I wish to **decrease** my loan as follows:

Total amount previously requested

\$ \_\_\_\_\_

Amount to be cancelled/returned

- \$ \_\_\_\_\_

**Total amount requested for year 20** \_\_\_\_\_

**= \$** \_\_\_\_\_

**To cancel this loan:**

\_\_\_\_\_ I no longer wish to borrow this loan for the \_\_\_\_\_ academic year (E.g. 2015-2016, 2016-2017, etc.).  
Please cancel this loan in its **entirety**.

PRINT NAME \_\_\_\_\_ ID # \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_