

2026-2027 FINANCIAL AID ADJUSTMENT FORM

_____ OR _____
 STUDENT'S NAME USC ID VIP ID

Please indicate the term you wish to make changes (all students must complete this section):		
<input type="checkbox"/> Fall 2026	<input type="checkbox"/> Spring 2027	<input type="checkbox"/> Summer 2027

CANCELLATION REQUEST

I wish to cancel all of my financial aid (including grants and scholarship funds).
Please note these funds may no longer be available due to funding limitations

I wish to cancel all of my Federal Direct Loans.
 I wish to cancel my PLUS Federal Direct Loan.

I wish to cancel my Subsidized Federal Loan.
 I wish to cancel my Private Alternative Loan.

I wish to cancel my Unsubsidized Federal Loan.

IMPORTANT NOTE TO ALL LOAN RECIPIENTS: If you received Federal Direct Loan proceeds during your enrollment at USC Aiken, you must complete Loan Exit Counseling when you withdraw, graduate, or drop below half-time (6 credit hours) attendance. This process can be completed online at www.studentaid.gov. Select Manage Loans Tab and then the Complete Exit Counseling Tab to follow the instructions to complete your exit counseling. USC Aiken will receive an electronic confirmation upon completion of the exit counseling session.

REINSTATEMENT REQUEST

I wish to reinstate all of my financial aid (including grants and scholarship funds).
Please note these funds may no longer be available due to funding limitations

I wish to reinstate my federal direct loan(s) for the amount listed below:

Subsidized \$ _____ Unsubsidized \$ _____ PLUS \$ _____

LOAN ADJUSTMENT REQUEST

I am graduating in December. Please process my loan for the Fall term only. I understand that my loan amount will be prorated based on enrollment for one term.

I wish to apply for \$ _____ in additional Federal Direct Loan(s) due to grade level change.
 My grade level is now: Sophomore Junior/Senior

My parent was denied a PLUS loan. I wish to apply for \$ _____ in additional Unsubsidized funds.

I wish for the Office of Financial Aid to please accept my subsidized loan for \$ _____.

I wish for the Office of Financial Aid to please accept my unsubsidized loan for \$ _____.

My signature below authorizes the USC Aiken Office of Financial Aid to make the above changes. I understand that if I have requested a cancellation of a loan or other financial aid that has disbursed to my account, I am responsible for paying the balance due to USC Aiken.

Student's Signature

Date