



RETURN TO:
 Office of Financial Aid & Scholarships
 Cal Poly Pomona
 3801 W. Temple Ave.
 Pomona, CA 91768-4008
 (909) 869-3700 Phone
 (909) 869-4757 FAX



DIRECT PLUS LOAN CHANGE

This form should be completed by the parent in order to request revisions to the PLUS Loan. If you wish to increase your PLUS Loan, a new [PLUS Application](#) will need to be submitted.

Section A: STUDENT INFORMATION

Student Name: _____	Bronco Number: _____
---------------------	----------------------

Section B: PARENT/BORROWER INFORMATION *(Provide complete information for one parent only and print legibly)*

Parent Name: _____	Social Security Number: _____	Date of Birth: _____
--------------------	-------------------------------	----------------------

Citizenship: U.S. Citizen U.S. Naturalized Citizen Eligible Non-Citizen A# _____

Relationship to Student: Mother (Step-Mother) Father (Step-Father)

Section C: DIRECT PLUS LOAN CHANGE INFORMATION

Change mailing address to:

Street:	_____
City:	_____
Zip:	_____
Phone:	_____
Email Address:	_____

Reduce the PLUS loan amount requested to : \$ _____

Cancel* the PLUS Loan Requested for:

<input type="checkbox"/> Entire year (Fall & Spring)
<input type="checkbox"/> Fall <input type="checkbox"/> Spring
<input type="checkbox"/> Summer

Section D: REVIEW AND SIGN

I agree to provide information that will verify the accuracy of the completed form. I certify that I am the person identified by the parent signature.

Parent/Borrower Signature: _____ Date: _____

If persons completing this form purposely give false or misleading information or signatures, those persons may be fined, sent to prison, or both.