



# Lander University Financial Aid Office

23PLAD

320 Stanley Avenue, Greenwood, SC 29649  
Email: [finaid@lander.edu](mailto:finaid@lander.edu) • Web: [www.lander.edu/finaid](http://www.lander.edu/finaid)  
Phone: (864) 388-8340 • Fax: (864) 388-8811

## 2022-2023 Federal Direct PLUS Loan Adjustment Request

PLEASE PRINT CLEARLY - DO NOT USE PENCIL  
Allow up to 7-10 business days to process

Student's Last Name      First Name      MI      Lander ID (L #)

Parent's Last Name      First Name      MI      Phone Number

Federal Direct Parent Loans (PLUS) are a serious obligation, which must be repaid in full, plus interest. Therefore, we encourage you to carefully consider the amount of the loan funds you request and borrow wisely! Think twice before borrowing; do not borrow just because you may be eligible. **Federal Direct PLUS Loans enter repayment 60 days after the final disbursement is sent to the school.**

Reason for request: \_\_\_\_\_

Complete the following: Loan Adjustment Requested: \_\_\_\_\_ **NET** Circle One: Increase      Decrease

Total Loan Amount Requested \_\_\_\_\_ **NET**

Term Adjustment Requested: Fall/Spring \_\_\_\_\_ Fall Only \_\_\_\_\_ Spring Only \_\_\_\_\_ Summer Only \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

**The amount requested may be adjusted by the Financial Aid Office since total financial aid cannot exceed the student's cost of attendance. If the student is not ENROLLED in 6 credit hours AT LANDER UNIVERSITY, they are not eligible for a Federal Loan disbursement.**

Estimate Monthly Payment Amount:: <https://studentaid.gov/loan-simulator/>  
Visit Federal Student Aid at <https://studentaid.gov> to obtain your total FEDERAL loan debt.

I understand I am requesting financial aid in the form of a debt that must be repaid. I understand to have loan funds disbursed my student must be enrolled and attending at least 6 credit hours that count towards an eligible program. I understand loan funds will be split between fall and spring semesters unless I request otherwise. Your signature acknowledges you have read this document.

\_\_\_\_\_  
Parent Borrower's Signature

\_\_\_\_\_  
Date

### Financial Aid Office Use Only

DATA ENTRY	xxPLAD	COUNSELOR REVIEW	
RRAAREQ	N=Pending Review	RPAAWRD	CHECK ROAENRL HRS AND LOAD CODE ON RPAAWRD
Initials/date		RLADLOR	
Fwd to Counselor date		RRAAREQ	
		RHACOMM	S = Satisfied, eligible
		CNSLR Initials/date	