ATLANTA'S JOHN MARSHALL LAW SCHOOL

2025-2026
Loan Adjustment Request Form

Office of Financial Aid
245 Peachtree Center Avenue NE, Suite 1900, Atlanta, GA 30303
Phone: (678)916-2600, ext. 2675 Fax: (404) 873-3802

If you would like to adjust or cancel a federal loan, you may do so by completing and submitting this form to the Office of Financial Aid (OFA). **You must submit this form if you are taking credit hours above the flat-rate tuition course load (over 16 credit hours per semester for full-time enrollment, or over 11 credit hours per semester for part-time enrollment), you MUST submit this Loan Adjustment Request Form to the Office of Financial Aid.** Failure to submit this form will result in not receiving financial aid to cover the additional cost per credit hour over the standard course load. **Processing period: 3 to 7 days.**

Be aware the OFA is unable to change a loan amount once funds have been disbursed from the Department of Ed. In addition, if you wish to cancel all or a portion of your disbursed loan(s), you have 14 days from the date of disbursement to submit this form to our office or notify the Bursar, and the OFA will return funds to the lender on your behalf or you may contact the Bursar's office directly. After the 14th day, it will be the student's responsibility to return funds directly to the lender (the Department of Education). Failure to pay any tuition due for credit hours enrolled above the standard course load will result in a hold on your student account. **The OFA will process/award this loan within 3 to 7 business days once submitted to our office.**

STUDENT INFORMATION

Student Name (Print): _____ _____ ___ ID: ☐☐☐☐☐☐☐☐☐
Last First MI

Law School E-mail: _____ Phone: (_____) _____

LOAN INFORMATION

Federal Unsubsidized Stafford Loan

FULL ACADEMIC YEAR CHANGES

☐ Cancel entire loan
☐ Reinstate entire loan
☐ Reduce loan to $_____

CHANGES BY TERM

☐ Fall 2025 ☐ Spring 2026 ☐ Summer 2026
☐ Reduce to/by $_____
☐ Increase to/by $_____

Federal Grad Plus Loan (GPL)

FULL ACADEMIC YEAR CHANGES

☐ Cancel entire loan
☐ Reinstate entire loan
☐ Reduce loan to $_____

CHANGES BY TERM

☐ Fall 2025 ☐ Spring 2026 ☐ Summer 2026
☐ Reduce to/by $_____
☐ Increase to/by $_____ ☐ Up to COA

Tuition and Fees Only

FULL ACADEMIC YEAR CHANGES

☐ Award loan funds for tuition and fees only

CHANGES BY TERM

☐ Fall 2025 ☐ Spring 2026 ☐ Summer 2026
☐ Award loan funds for tuition and fees only

By my signature below, I certify that I have read and understand the information being provided. Please allow 3 to 5 business days for your request to be processed by our office.

Student Signature _____ **Date** _____/_____/_____

OFFICE OF FINANCIAL AID USE ONLY

Enrollment Type: ☐ **FT** ☐ **PT**

Date Adjustment Form Received: _____ Direct Loan CA Aid Code: _____ Hours Enrolled:_____

Credit Hour(s) Adjustment ☐ Yes No ☐ Loan Adjustment for loan Increase ☐ Decrease ☐ Loan Cancellation ☐

Date Adjustment Processed: _____ Financial Aid Director Signature: _____